

RELEASE OF LIABILITY AND ASSUMPTION OF RISK

In consideration of the services of Bella's Bouncies, Inc., its employees and agents collectively, I agree to release, hold harmless and indemnify Bella's Bouncies, Inc., on behalf of myself and my family members, partners, heirs and assigns as follows:

1. As the undersigned Participant, I fully recognize that there are dangers and risks to which I may be exposed by participating in the activities provided by Bella's Bouncies, Inc.
2. As the undersigned Participant, I understand Bella's Bouncies, Inc., does not require me to participate in these activities, at no designated time, but I choose to participate despite the possible dangers and risks, and despite this release.
3. The risk of injury from these activities is present, including the potential for permanent paralysis and death. While particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist, including, but not limited to; broken ankles, broken legs, stubbed and or broken toes, knee injury, shin bone injury, brain injury, neck injury, spinal injury, headaches, dizziness, loss of appetite, vomiting, and fatigue. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I agree to assume and take on myself all the risks and responsibilities in any way arising from or associated with said activity, and I release Bella's Bouncies, Inc., from any and all claims, demands, suits, judgments, costs, damages, actions and liabilities of every name and nature whatsoever, whenever occurring, whether known or unknown, contingent or fixed, at law or in equity, that I may suffer at any time arising from or in connection with the participation in said activities, including any injury or harm to me, my death, or damage to my property (collectively, "Liabilities"), and I agree to defend, indemnify and hold Bella's Bouncies, Inc., there directors, officers, officials, agents, volunteers, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event, harmless from and against any and all Liabilities.
5. As the undersigned Participant, I recognize that this release means that I am giving up, among other things, all rights to sue for injuries, damages or losses I may incur. I also understand this release binds my heirs, executors, administrators, legal representatives and assigns, as well as me.
6. I also affirm that I have adequate medical and health insurance to cover any and all medical assistance I may require.
7. I agree this release shall be governed for all purposes by the law of the State of Illinois, without regard to such law on choice of law.
8. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, and/or organizers.

I have read this release in its entirety and fully understand the entire release and acknowledge that I have had the opportunity to review this release with an attorney of my choosing if I so desire, and agree to be legally bound by the release.

Participant's Signature: _____ Date: _____

Print Name: _____

Parent or Guardian's Signature (under 18): _____ Date: _____