

**WAIVER**

Using the Jump XL trampolines involves risks (of injury) which cannot be excluded without compromising the activity. By signing this waiver you acknowledge that the activities (jumping on the trampolines, trampoline dodge ball, trampoline basketball, jumping on the PillowPit (stunt cushions) and jumping from the Jump tower and the courses and/or other sports activities) facilitated by Jump XL or by the third parties it engages can cause injuries.

**By signing this waiver:**

- (i) I acknowledge that my participation in the activities of Jump XL is on a voluntary basis;
- (ii) I acknowledge that I have chosen to participate in the activities, despite the risks which have been pointed out to me explicitly by Jump XL in advance and which I am therefore aware of;
- (iii) I acknowledge that I have explicitly chosen to participate, at my own risk, in the activities facilitated by Jump XL or by third parties it has engaged;
- (iv) I indemnify Jump XL and the third parties it engages explicitly against all losses I may suffer as a result of my participation in the activities facilitated by Jump XL or by third parties it has engaged, including losses that third parties can suffer as a result of my participation.

By signing this waiver I declare that I am familiar with the General Terms and Conditions, the house rules and the safety instructions of Jump XL, as published on the website of Jump XL and notified in the premises and the buildings of Jump XL and I agree to adhere to the directions and instructions issued by the staff of Jump XL and/or by another third party or other third parties engaged by Jump XL.

**Visitor(s) details:**

1. First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number and e-mail: .....
2. First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number and e-mail: .....
3. First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number and e-mail: .....
4. First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number and e-mail: .....
5. First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number and e-mail: .....
6. First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number and e-mail: .....

**In the event the visitor is a minor, details of the minor's legal representative or supervisor:**

First and last name (in capital letters): .....  
Date of Birth: ...../...../.....  
Telephone number: .....  
E-mail: .....

**By signing this waiver I confirm that I have read, understood and accept all of the aforementioned conditions:**

Date: .....  
Signature of adult visitor / legal representative or supervisor of visitor who is a minor:

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Please cross if you would like to receive details of offers/special promotions from Jump XL and give Jump XL permission to use the details above for offers/special promotions from Jump XL. Jump XL will not share these details with third parties for commercial purposes.