

ADULT WAIVER FORM (Age 18 and older)

3950 Johns Creek Court | Suwanee, GA 30024 770.559.5430 www.JUMPTNT.net

How did you hear about us?:	
Check which Event you are Attending	Date:
	Other (specify):
Name (print first and last):	Age:
Email Address:	Cell Phone:
Emergency Contact:	Phone:
Allergies/Medications/Special Instructions:	
aware of these risks, I agree that I am volunt damages, or injuries. I hereby waive, rel indemnify Jump Kangaroo, LLC, d.b.a. Jump employees, associated personnel, and volun	ne potential exists for injury, minimal to catastrophic. Being fully tarily participating in these activities and I assume all risks, losses, lease, discharge and/or otherwise forever hold harmless and p TNT, Ninja Zone, LLC, it's owners, officers, directors, coaches, teers from and against any and all demands, claims and causes of my or my child's participation in any class, program, exhibition, vent in which the above named is involved.
staff are unable to reach your emergency co	to render first aid in the event of any injury or illness. If Jump TNT intact, they may seek medical assistance if deemed necessary and an ambulance. You agree to be responsible for any financial debt
	deo may be taken during the course of a special event. I hereby notograph and/or video to be used for any and all publicity,
Signature:	

By signing, I agree to the Assumption of Risk/Release of Liability, Medical Emergencies, and Photo statements above.