

Grimm's Escape Games, LLC Waiver

ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

MUST BE SIGNED BY ALL GUESTS AND IF PARTICIPANT IS UNDER THE AGE OF 18

MUST BE SIGNED BY A PARENT OR LEGAL GUARDIAN

By signing this document you HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THIS ESCAPE ROOM EVENT at Grimm's Escape Games, LLC, 2424 South Campbell Avenue, Suite 120, Springfield, Missouri, 65807.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the company of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

By signing this waiver for myself, or as the parent or guardian of a minor, I agree to and accept full responsibility in regards to the following:

- I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me, THE FOLLOWING PERSONS OR ENTITIES: The directors, officers, employees, volunteers, representatives, and agents of any and all entities authorizing this activity;
- INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that the employees and representatives of any authorizing entity are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf. I hereby consent to receive medical treatment which may be deemed advisable in the the event of injury, accident, and/or illness during this activity.

I have no physical or mental illness that prevents my participation in a safe manner for myself or others. I am not under the influence of drugs or alcohol or anything else that may impair my ability to participate in a safe manner for myself or others.

I understand while participating in this activity I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose this authorizing entity decides, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

[illegible]