



**LITTLE PUFFINS**  
DISCOVERY PLAYLAND

# WAIVER

This Waiver, Release and Hold Harmless Agreement must be completed by a parent or legal guardian for each child prior to admission. Waivers will be held on file and a copy will be provided to the parent or legal guardian named in the waiver upon request.

CHILD(REN)'S NAME		DATE OF BIRTH		
First Name	Last Name	MM	DD	YYYY

<b>ADDRESS</b>					
<b>CITY</b>		<b>STATE</b>		<b>ZIP</b>	
<b>eMAIL ADDRESS</b>					

### Communication Preferences

Little Puffins Discovery Playland has a social media presence, but it is sometimes useful to be able to communicate directly, and we want to know if we have your permission to communicate news and promotional information about Little Puffins Discovery Playland to you by email. And, of course, we would never share your information.

**Do we have your permission to communicate by email?**     **Yes**         **No**

### Please Read the Following Carefully

As the parent or guardian of a participant in the Little Puffins Discovery Playland program(s) I recognize and acknowledge that there are certain risks of physical injury, and I agree to assume the full risk of any injuries, including death, damage or loss of any kind arising in any manner as a result of participating, in any manner, in any and all activities associated with the program(s). I also recognize and acknowledge that all program activities involving strenuous exertion or body contact are hazardous recreation activities, which involve substantial risk of injury to a participant. Further, I understand that this agreement encompasses all exercises and physical movements of any nature undertaken in the programs(s), the use and adjustment of any and all machinery, equipment, apparatus and anything related to my use of the services, facilities or premises involved in the program(s) as well as the provision of or failure to provide instructions or supervision. I hereby agree to waive and relinquish any and all claims that I may have against Little Puffins Discovery Playland, their employees and agents, due to participating

in the program(s). I further release and discharge Little Puffins Discovery Playland, their employees and agents from any and all claims for injuries, including death, damage or loss that I may have or that may accrue to me because of my participation in the program(s). I also hereby agree to indemnify, hold harmless and defend Little Puffins Discovery Playland, their employees and agents from any and all claims resulting from injuries, including death, damages and loss sustained by anyone, which arise out of or are in any way associated with my conduct or the conduct of those individuals participating under my supervision and/or the activities of the program(s). I understand the nature of the program(s) for which I am registering and have read and fully understand the Waiver, Release and Hold Harmless Agreement. I further understand and agree that any advertisements or warnings of the particular risks of the program(s) that I subsequently receive will be incorporated herein by reference and become a part of this Agreement. My participation in this activity is voluntary and no one is forcing me to participate in spite of the risks. I understand the effect of this waiver and acceptance of risk on my legal rights. By signing this release of liability and participating in the Little Puffins Discovery Playland program(s), I hereby fully and forever release and discharge indemnify and hold harmless Little Puffins Discovery Playland, their employees, agents and the property owner from any and all liabilities, claims, demands, damages, rights of action, suits or causes of action present or future, whether they be known or unknown, anticipated or unanticipated, resulting from or arising in any way out of my use or intended use of said premises, facilities or equipment to the fullest extent permitted by law. I fully and forever release and discharge the released parties and their employees and agents from any and all negligent acts and omissions in the same, and intend to be legally bound by this release to the fullest extent permitted by law.

**Please indicate your consent to this waiver.**

Initials
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**I consent to the terms of this waiver.**

**Permission to Use Photograph or Likeness:** I hereby give my permission to Little Puffins Discovery Playland to use my child's photographic image, in whole or in part, for Playland-specific public information and for marketing activities at the discretion of Little Puffins Discovery Playland. I understand that the photography remains the property of Little Puffins Discovery Playland.

**Please indicate your consent to the photograph waiver.**

Initials
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**I consent to the terms of this waiver.**

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Today's Date:

\_\_\_\_\_  
Printed Name of Parent or Guardian

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Phone