
STAMP
HERE

www.TikisFamilyFunCenter.com • 539-2222

PHONE: _____

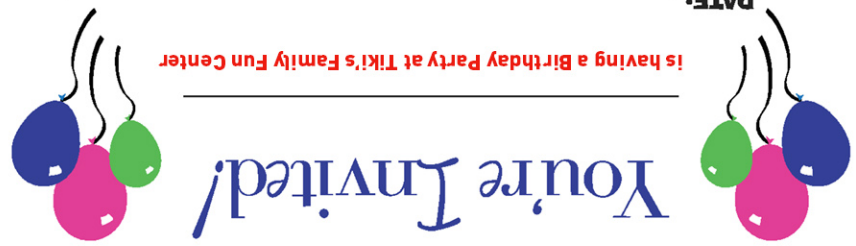
BY: _____

RSVP TO: _____

PLACE: AT DOLE CANNERY - 735 IWILEI ROAD HON, HI 96817

TIME: _____

DATE: _____



Assumption of Risk and Waiver Liability for Tiki's Family Fun Center

In consideration of my being allowed in any parties or programs as Tiki's Family Fun Center, I the undersigned hereby agree to and acknowledge the following:

1. I will comply with all Tiki's Family Fun Center's rules, regulations and conditions required for participation. If I have question, or observe any hazard during my participation, I will immediately bring it to the attention of the nearest Tiki's Family Fun Center employee or official.
2. There is a risk of injury from the use of this equipment. Although rules, regulations and personal discipline reduce the risk, the risk still exists.
3. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, including those arising from the negligence of the persons released from liability below and I assume full responsibility for me and my family's participation; and
4. I, for myself and on behalf of my family's heirs, assigns, personal representatives, and next of kin, HEREBY RELEASE, INDEMNIFY AND HOLD HARMLESS TIKI'S FAMILY FUN CENTER, its officers, directors, shareholders, affiliates, agents, employees, their successors and assigns, other participants and sponsoring agencies with respect to any and all injury, disability, or loss of damage to person or property to the fullest extent of the law.

I have read this release of liability and assumption of risk agreement, fully understand its terms and sign it voluntarily.

Participant #1 Name / Date of Birth	Participant #2 Name / Date of Birth
Address	City/State/ZIP
Adult/Guardian Signature	Date of Participation
Emergency Phone Number	

Please bring this waiver signed ONLY by the parent or legal guardian for the child to participate in the party activities.