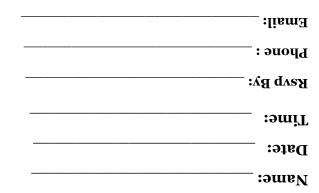
Address:			
Cell Number(s):		Ноте Рһопе Уитрег:	
Parent or guardian name(s):		Parent or guardian signature(s):	
	- 9gV		9gA
.anka	9gV		9gA

Participant (s) Name:

I give my permission and accept full responsibility for the Child or Children listed below to participate in Anamaement ridge; all or which are Inflatables, Inc. As Condition to child's participation and by signing this form, I acknowledge and agrees as follows: I acknowledge and understand that the operatory) have advised one of the proper use and possible acknowledge and understand that the operatory) have advised one of the proper use and possible abstances of playing on the inflatables. The Child (children) and I are solely responsible for the control which are not to participate or to rely upon any instructions, advice, or information received regarding which or not to participate or to rely upon any instructions, advice, or information received regarding the control of the control of

SUPER BOUNCE INFLATABLES, INC. Acknowledgement of Risk, Waiver of Liability and Participant Agreement



A party at Super Bounce Located in the Springhill Mall in West Dundee, IL, 60118. (Located Next to Macy's) (847) 428-8211 superbounceinc@yahoo.com

You are invited to





PARENTS AND
CHILDREN ARE
REQUIRED TO
WEAR SOCKS. NO
SHOES INSIDE
THE FACILITY !!!!

You're Invited

To PARTY

At!!!!!

