In consideration of being allowed to enter the play area and/or participate in any party at Games Galore Party Zone of Fargo, ND, the undersigned, on his or her behalf, and on the behalf of the participant(s) identified below, acknowledges, appreciates and agrees to the following conditions:

I represent that I am the parent or legal guardian of the participant(s) named below, or I have obtained permission from the parent/legal guardian of the participant(s) named below to execute this agreement on their behalf. I agree that the participant(s) named below and I shall comply with all stated and customary terms, posted safety signs, rules, and verbal instructions as conditions for participation in any party and/or program at Games Galore Party Zone. In addition, if I observe any hazard during our participation, I will bring it to the attention of the nearest Game Galore Party Zone Employee or official immediately.

I am aware that there are inherent risks associated with participation in Games Galore parties and the use of inflatable equipment and I, on behalf of myself and the participant(s) named below, knowingly and freely assume all such risk, both known and unknown, including those that may arise out of the negligence of other participants; and, I for myself and the participant(s) named below, and our respective heir, assigns, administrators, personal representatives, and next of kin, hereby release and hold harmless, CTN Inflatables, Inc. DBA Games Galore Party Rental and/or Games Galore Party Zone, their affiliates, officers, members, agents, employees, other participants, and sponsoring agencies from and against any and all claims, injuries, liabilities or damages arising out of or related to our participation in any and all Games Galore Party Rental or Games Galore Party Zone programs, activities, parties, the use of the play area and/or inflatable equipment.

Games Galore admits up to 15 participants per party package. Additional participants will be charged $10 per person. All participants listed below will receive a wrist band upon arrival for admittance on the games. No one will be allowed on the games prior to check in.

Participants Name	Date of Birth	Extra Participant(s) Name	Date of Birth
1._____	_____	1._____	_____
2._____	_____	2._____	_____
3._____	_____	3._____	_____
4._____	_____	4._____	_____
5._____	_____	5._____	_____
6._____	_____	6._____	_____
7._____	_____	7._____	_____
8._____	_____	8._____	_____
9._____	_____	9._____	_____
10._____	_____	10._____	_____
11._____	_____		
12._____	_____		
13._____	_____		
14._____	_____		
15._____	_____		

_____ _____ _____

Parent/Guardian-Signature Printed Name Date

_____

Address