

### Waiver of Liability

Child No. 1

Child's Last Name: \_\_\_\_\_

Child's First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Child No. 2

Child's Last Name \_\_\_\_\_

Child's First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Child No. 3

Child's Last Name \_\_\_\_\_

Child's First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Parent/Responsible Adult's Name: \_\_\_\_\_

Parent/Responsible Adult's Mobile Phone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

I understand the Conditions of Entry to the Premises and have explained same to the children for whom I am responsible.

I agree that I and the children for whom I am responsible will abide by and are bound by all conditions of entry.

Signature of Parent/Responsible Adult: \_\_\_\_\_

(please delete as appropriate)

Please print name: \_\_\_\_\_

Date: \_\_\_\_\_