

**PARTICIPANT WAIVER, RELEASE, ASSUMPTION OF RISK,
AND INDEMNIFICATION AGREEMENT**

This Waiver, Release, Assumption of Risk, and Indemnification Agreement ("Release") is voluntarily executed by [redacted] ("Participant") on [redacted] ("Effective Date"). The Release is pertaining to the use of the facilities of Adrenaline Family Adventure Park ("Adrenaline"), located at 10080 East 21st Street, Suite 182, Fishers, IN 46037, specifically, my participation in the dodgeball trampoline court, trampolines, sky jousting, warrior course, warp wall, soft play (a/k/a jungle gym), basketball court trampoline, zipline, rock wall, Rubix cube, ropes course, and other attractions at the Adrenaline Family Adventure Park facility ("Attractions").

I acknowledge and agree that this Release is intended to release and provide other benefits, legal protections, and consideration to ADRENALINE, and their agents, owners, officers, managers, shareholders, affiliates, volunteers, participants, employees, assigns, and all other persons or entities acting in any capacity on their respective or collective behalf ("Releasees").

I acknowledge and agree that the use of the Attractions, or observation of others using the Attractions has inherent and obvious dangers. These risks include serious physical or emotional injury, infection with disease or viruses, including, but not limited to, COVID-19, paralysis, death, damage to myself and/or third parties, and may include damage to personal property of any or all such persons. I understand that these risks are inherent in the essential qualities of the activities and cannot just be removed without substantially changing the activity. I further agree that this activity is for recreational purposes and completely voluntary.

I agree to use the Attractions in a safe and responsible manner. Further, I agree and understand that participating in the Attractions while under the influence of drugs, prescription or illegal, and/or alcohol significantly increases the above risks and I assume any risk of participating while under the influence of any drugs and/or alcohol.

BY SIGNING THIS DOCUMENT, I REPRESENT THAT I HAVE CAREFULLY READ THIS RELEASE AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS, CAUSES OF ACTION FOR MY LOSS, DAMAGE, ILLNESS, INFECTION, OR INJURY, INCLUDING DEATH, WHETHER OR NOT KNOWN OR ANTICIPATED, THAT OCCUR WHILE PARTICIPATING IN THE ATTRACTIONS. I FURTHER UNDERSTAND AND AGREE TO INDMNIFY ADRENALINE, ITS OWNERS, TRUSTEES, OFFICERS, EMPLOYEES, AND AGENTS FOR ANY LIABILITY FOR ANY INJURY, DAMAGE OR LOSSES OF ANY KIND CAUSED BY MY NEGLIGENT OR INTENTIONAL ACTS WHILE PARTICIPATING IN THE ATTRACTIONS WHILE AT THE FACILITY. THE SIGNATURE BELOW IS PROOF OF MY INTENTION TO EXECUTE A COMPLETE AND UNCONDITIONAL WAIVER, RELEASE, AND INDEMNIFICATION OF ALL LIABILITY TO THE FULL EXTENT OF THE LAW.

I have read and understand the terms of this Agreement and unconditionally agree to its full terms, statements, warranties, notices, representations, waivers, and releases on behalf of both myself and marital community, if any, and my child or ward, whose name is:

First Name: [redacted] Last Name: [redacted] DOB: [redacted]

All such terms, statements, warranties, notices representations, waivers, and releases fully apply to my child or ward as if I was the participant. I understand that, by signing this Release on behalf of the above-mentioned child or ward, I am giving up important legal rights both on behalf of myself and the Child, regarding potential rights and claims against Adrenaline. I hereby warrant and represent that if I am neither the Child's Parent nor legal Guardian, I have been granted the expressed authority to execute this Agreement by, and on behalf of, the Child's Parent or Guardian.

PARENT OR GUARDIAN INDEMNIFICATION

AS THE INDIVIDUAL SIGNING THIS AGREEMENT ON BEHALF OF A MINOR OR OTHER INDIVIDUAL, I AGREE TO FULLY INDEMNIFY AND HOLD HARMLESS ADRENALINE, ITS AGENTS, OWNERS, OFFICERS, MANAGERS, SHAREHOLDERS, AFFILIATES, VOLUNTEERS, PARTICIPANTS, EMPLOYEES, ASSIGNS, AND ALL OTHER PERSONS OR ENTITIES ACTING IN ANY CAPACITY ON ITS RESPECTIVE OR COLLECTIVE BEHALF, FOR ANY AND ALL CLAIMS CONNECTED WITH, ARISING OUT OF, OR RESULTING FROM THE INDIVIDUAL OR CHILDS USE OF THE ADRENALINE FACILITY OR ATTRACTIONS.

Participant's Signature: [redacted] Date: [redacted]

[redacted] I represent that I am 18 years of age or older.

[redacted] I represent that I have had ample time to read this Release and that I have entered into this agreement voluntarily, freely, under no threat of duress, without inducement, promise, or guarantee being communicated to me.