

# WAIVER AND RELEASE OF LIABILITY

## The Nexus Indoor Amusement Park Ltd

Address: 11326 119 Street NW, Edmonton, Alberta

Phone: 780-200-7188

### **1. PARTICIPANT INFORMATION**

Full Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

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

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

If participant is under 18:

Parent/Guardian Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

### **2. ACKNOWLEDGMENT OF RISKS**

I understand that participation in activities at The Nexus Indoor Amusement Park Ltd, including but not limited to VR rides, flying cinema, arcade games, and indoor play structures involves risks such as falls, collisions, motion sickness, or equipment malfunction.

### **3. ASSUMPTION OF RISK**

I voluntarily accept all risks, both known and unknown, associated with participation.

### **4. RELEASE OF LIABILITY**

I release, waive, and discharge The Nexus Indoor Amusement Park Ltd, its owners, employees, and affiliates from any liability for injuries, damages, or losses arising from participation, including those caused by negligence.

### **5. RULES AND CONDUCT**

I agree to follow all rules, including: following staff instructions, no rough play, respecting safety guidelines, and using equipment properly.

### **6. HEALTH & SAFETY**

I confirm that I (or my child) am physically able to participate and have no medical condition that would increase risk. Do not participate if pregnant or with serious heart, neck, or motion-related conditions.

### **7. PHOTO & VIDEO CONSENT**

I consent to photos/videos being used for promotional purposes

I do NOT consent

**8. INDEMNIFICATION**

I agree to indemnify and hold harmless The Nexus Indoor Amusement Park Ltd from any claims brought by or on behalf of the participant.

**9. GOVERNING LAW**

This agreement shall be governed by the laws of the Province of Alberta and Canada.

**10. ACKNOWLEDGMENT**

I confirm that I have read and understood this waiver, and I am signing it voluntarily.

**11. SIGNATURE**

Participant Signature:	_____	Date:	_____
Parent/Guardian Signature:	_____	Date:	_____