



#1 CHOICE FOR TEAM BONDING
| BIRTHDAY PARTIES | CORPORATE
EVENTS

PARTICIPANT WAIVER FORM

As consideration for being allowed to enter the premises and/or participate in any party and/or program at Adventure Hub, the undersigned, on his or her behalf, and on behalf of the participant identified above, acknowledges, appreciates, understands, and agrees to the following:

By providing your e-mail address you acknowledge Adventure Hub Malta may send you e-mail including discount offers, special events & news.

1. Acknowledge that participation in the Adventure Hub games involves physical activity that could result in injury to the participant(s.) The participant(s) assume full responsibility for any injuries or damages which may occur to or be caused by the participant(s) in, on, or about the game's premises from whatever cause, including, without limitation, the affirmative negligence of Adventure Hub Malta, its owners, employees, or agents, and completely releases and discharges Adventure Hub Malta and all associated outlets, its and their owners, employees, and agents from all claims, damages, or other liabilities present or future, whether or not known or anticipated that may result from or arise out of the participant(s)' use or intended use of the game or the premises, facilities, and equipment related thereto. For any participant under 21 years of age, he or she has discussed the terms and conditions of this waiver with the participant(s) parent or legal guardian and have their parents or legal guardian's consent to their signing this release.
2. Agree to play Adventure Hub Malta games according to the rules and instructions given to me by any members of Adventure Hub Malta staff. I acknowledge that Adventure Hub Malta accepts no responsibility for any act or thing done by me, which is not in accordance with the rules and instructions.
3. Accept full responsibility for any damage to Adventure Hub Malta premises, facilities, and/or equipment caused by me.
4. Agree to inform a member of the Adventure Hub Malta staff of any medical condition or treatment that I have prior to participating in the games.
5. I grant THE ADVENTURE HUB full rights to use photography/video filming, and any reproductions or adaptations of the images for publicity. This might include (but is not limited to), the right to use them in their printed and online publicity, social media and press releases.

Signature of Participant (or parent/legal guardian)

____/____/_____
Date