



Field Trip Permission Slip



Date	Thursday, July 20, 2023 (Week 5)
Location	Sky Zone (3rd-Teen)
Cost	\$50 per camper
Transportation	First Student
Notes	Campers will enjoy bouncing around an indoor trampoline park. Includes sky zone socks. SKY ZONE'S ONLINE WAIVER MUST BE FILLED OUT BY <u>JULY 7TH</u> FOR YOUR CHILD TO ATTEND. Lunch included (2 slices of pizza and a drink)

PLEASE BE SURE TO COMPLETE & RETURN **ALL** PAGES OF THE PERMISSION SLIP & WAIVER

I give permission for _____ in camp grade _____
to attend the field trip to **Sky Zone** on **Thursday, July 20, 2023**

My camper has allergies (please list): _____

In case of an emergency, I give permission for my child to receive medical treatment. In case of such an emergency, please contact:

Name _____ Phone _____

Name _____ Phone _____

Parent/Guardian Signature

Date



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PARENT/GUARDIAN INFORMATION

First Name _____ Last Name _____

Email _____ Gender _____

Birthdate ____ / ____ / ____

Address _____ City _____ State _____ Zip _____

Phone _____

CHILD INFORMATION

First Name _____ Last Name _____

Birthdate ____ / ____ / ____ Gender _____

I AGREE (1) You are willing to practice social distancing and maintaining at least six feet between individuals in all areas of the park; (2) You are healthy enough to participate, and do not have symptoms of COVID 19 such as feeling sick, coughing, sneezing, shortness of breath, fever or are not feeling well; (3) You do not live with or visited a person or family member that has been diagnosed with or suspected of having COVID-19; (4) you consent to having you (or your minor child's) temperature checked upon entering the park.

I AGREE I acknowledge that the Sky Zone Facility may at any time engage in a promotion referred to as "Glow", and other similar programs and activities, that involve the use of reduced and altered or theatrical lighting and special effects, which can increase the inherent and obvious dangers of the activity and can lead to physical or emotional injury, paralysis, death, or damage to myself, the Child, and/or third parties, and damage to personal property of any or all such persons. I understand that special rules apply to "Glow" activities, and the other programs and activities that involve the use of reduced and altered or theatrical lighting and special effects, and that I and the Child may choose not to participate in such activities. I acknowledge and agree that I and the Child may participate voluntarily in the "Glow" and other similar programs and activities solely and exclusively at our own risk, and that by participating, we waive the right to seek damages for any injuries that occur.

I AGREE I understand that by agreeing to arbitrate any dispute as set forth in this section, I am waiving my right, and the right(s) of the minor child(ren) above, to maintain a lawsuit against SZ and the other Releasees for any and all claims covered by this Agreement. By agreeing to arbitrate, I understand that I will NOT have the right to have my claim determined by a jury, and the minor child(ren) above will NOT have the right to have claim(s) determined by a jury. Reciprocally, SZ and the other Releasees waive their right to maintain a lawsuit against me and the minor child(ren) above for any and all claims covered by this Agreement, and they will not have the right to have their claim(s) determined by a jury. ANY DISPUTE, CLAIM OR CONTROVERSY ARISING OUT OF OR RELATING TO MY OR THE CHILD'S ACCESS TO AND/OR USE OF THE SKY ZONE PREMISES AND/OR ITS EQUIPMENT, INCLUDING THE DETERMINATION OF THE SCOPE OR APPLICABILITY OF THIS AGREEMENT TO ARBITRATE, SHALL BE BROUGHT WITHIN ONE YEAR OF ITS ACCRUAL (i.e., the date of the alleged injury) AND BE DETERMINED BY ARBITRATION IN THE COUNTY OF THE SKY ZONE FACILITY, PENNSYLVANIA, BEFORE ONE



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ARBITRATOR. THE ARBITRATION SHALL BE ADMINISTERED BY JAMS PURSUANT TO ITS RULE 16.1 EXPEDITED ARBITRATION RULES AND PROCEDURES. JUDGMENT ON THE AWARD MAY BE ENTERED IN ANY COURT HAVING JURISDICTION. THIS CLAUSE SHALL NOT PRECLUDE PARTIES FROM SEEKING PROVISIONAL REMEDIES IN AID OF ARBITRATION FROM A COURT OF APPROPRIATE JURISDICTION. This Agreement shall be governed by, construed and interpreted in accordance with the laws of the Commonwealth of Pennsylvania, without regard to choice of law principles. Notwithstanding the provision with respect to the applicable substantive law, any arbitration conducted pursuant to the terms of this Agreement shall be governed by the Federal Arbitration Act (9 U.S.C., Sec. 1-16). I understand and acknowledge that the JAMS Arbitration Rules to which I agree are available online for my review at jamsadr.com, and include JAMS Comprehensive Arbitration Rules & Procedures; Rule 16.1 Expedited Procedures; and, Policy On Consumer Minimum Standards Of Procedural Fairness.

IN SUMMARY, BY MY SIGNATURE BELOW, I ACKNOWLEDGE THAT IF I OR ANY OF MY CHILDREN ARE INJURED IN ANY WAY, THIS WAIVER PREVENTS AND PROHIBITS ANY RECOVERY OF MONEY FROM ANY SKY ZONE RELATED ENTITY.

Parent/Guardian Signature _____ Date _____