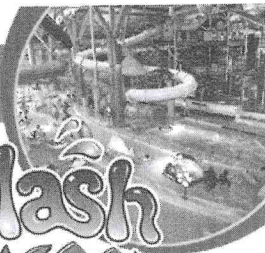


# SPLASH LAGOON RELEASE FORM



## PLEASE READ CAREFULLY BEFORE SIGNING RELEASE

I hereby acknowledge that I, the members of my family and our guests, in attending and using Splash Lagoon Indoor Water Park and related facilities located in Erie, PA, do so at my, our, and their own risk. Splash Lagoon Indoor Water Park shall not be liable for any loss or damage to personal property or for any injuries sustained by me, members of my family or our guests in, on or about the premises. I assume full responsibility for any injuries or damages which may occur to me or members of my family or to our guests in, or about the premises.

I do hereby fully and forever release and discharge Splash Lagoon Indoor Water Park, their employees and agents for any and all claims, demands, damages, resulting from or arising out of use of the facilities by me, the member of my family or our guests.

I hereby certify that I and the member participating in this function are in good health and are able to use the swimming pool and related facility without assistance. I understand that lifeguards will be present when we are using the facility. I and the members participating in this function will not use the facilities under the influence of alcohol or drugs. I understand that no areas in the facility are designed for diving. I have read and fully agree to abide by the rules and regulations for the use of Splash Lagoon Indoor Water Park.

I represent that at the time of receiving and signing the agreement and release, I am of lawful age and legally competent to execute it, and that before signing this agreement and release I have fully informed myself of its contents and execute with full knowledge thereof. By including your email, you will be added to our mailing list to receive special offers from our E-Club.

### PARENT/GUARDIAN INFORMATION:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-Mail Address \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### PARTICIPANT INFORMATION:

Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

**1-866-3-SPLASH - WWW.SPLASHLAGOON.COM**  
**8091 PEACH STREET, ERIE PA 16509**

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Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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