

**WARNING, AGREEMENT FOR PARTICIPATION, FOR FULL AND GENERAL
RELEASE, FOR ASSUMPTION OF RISK, FOR RELEASE OF LIABILITY, AND
FOR INDEMNITY, AND CONSENT FOR MEDICAL
TREATMENT (“AGREEMENT”)**

PLEASE READ THIS DOCUMENT CAREFULLY. DO NOT SIGN IT UNLESS YOU BOTH UNDERSTAND IT AND AGREE TO ALL OF ITS TERMS. BY SIGNING THIS AGREEMENT, YOU ARE, AMONG OTHER THINGS, WAIVING THE RIGHT TO SUE AND WAIVING THE RIGHT TO SEEK MONEY DAMAGES NOT ONLY FROM DUKE CITY JUMP, LLC, DOING BUSINESS AS FALLOUT TRAMPOLINE ARENA (HEREAFTER REFERRED TO AS “FALLOUT”) BUT FROM ITS MANAGERS, MEMBERS, CO-DEVELOPERS, CAPITAL CONTRIBUTORS, INSURERS, AGENTS, DIRECTORS, FACILITY OPERATORS, PREMISES OWNERS, EMPLOYEES, INDEPENDENT CONTRACTORS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS, ASSIGNS, EQUIPMENT SUPPLIERS, AND ANY AND ALL OTHER PERSONS OR ENTITIES ACTING IN ANY CAPACITY ON ITS BEHALF, TOGETHER WITH ANY ONE OR MORE SUCCESSORS OR ASSIGNS OF ANY ONE OR MORE OF THEM (HEREAFTER ALL OF THEM, INCLUDING FALLOUT, REFERRED TO COLLECTIVELY AS “THE RELEASED AND INDEMNIFIED PARTIES”). IF YOU DO NOT AGREE TO ANY TERM, PROVISION OR PARAGRAPH OF THIS AGREEMENT, DO NOT SIGN THE AGREEMENT AND PLEASE EXIT THE PREMISES IMMEDIATELY.

Date: _____ Time: _____

Printed name, birthdate, residence address, phone number, email address, and driver license number of adult Participant (hereinafter referred to as “I”):

Printed Name: _____ DOB: _____

Residence Address: _____

Phone Number: _____ Email: _____

Names, addresses, and birthdates of all minor children or wards on whose behalf I execute this Agreement (no minor person shall be allowed into the Facility unless the name, address and birthdate of that person are here clearly printed):

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

Name: _____ Address: _____

Birthdate: _____

**FALLOUT TRAMPOLINE ARENA RULES GOVERNING
USE OF THE FACILITY AND PARTICIPATION IN AND
OBSERVANCE OF ACTIVITIES AT THE FACILITY (“Rules”)**

These Rules are incorporated into the Agreement set forth on pages 3 through 5 below.

WARNING!!! Follow all rules outlined below to help reduce the risk of injury. Catastrophic injury, paralysis, or even death may result from use of these facilities—even if all rules are followed (due to inherent risks)

ALL WHO ENTER THE FACILITY, PARTICIPANTS AND OBSERVERS, MUST HAVE A SIGNED WAIVER ON FILE; PARTICIPANTS AND OBSERVERS UNDER THE AGE OF 18 MUST HAVE A WAIVER SIGNED BY A PARENT OR LEGAL GUARDIAN; YOUR USE OF THESE FACILITIES AND TRAMPOLINES AND YOUR PRESENCE HERE IS AT YOUR OWN RISK

A RESPONSIBLE PERSON SHOULD ALWAYS ATTEND CHILDREN UNDER THE AGE OF 12

PARTICIPANTS AND OBSERVERS MUST USE ALL EQUIPMENT IN A SAFE AND RESPONSIBLE MANNER. Jumpers should stay in the center of the trampoline when jumping. Injury may result from hitting the frame when control is lost. DO NOT jump directly onto the SAFETY PAD

ONLY ONE PERSON AT A TIME MAY JUMP ON A TRAMPOLINE; ABSOLUTELY NO DOUBLE-BOUNCING. Double-bouncing, defined as attempting to propel someone higher by timing a jump as another lands on the trampoline, is dangerous. It is especially dangerous for a larger person to bounce on a trampoline at the same time a smaller person does. Serious injury or death may result. Double-bouncing is strictly prohibited. Such activity will result in immediate expulsion without a refund

ONLY GRIPPER SOCKS SOLD AT THE FACILITY OR BAREFEET ARE ALLOWED ON TRAMPOLINES; SHOES MAY NOT BE WORN ON TRAMPOLINES

DO NOT SIT OR LIE ON THE TRAMPOLINE BEDS OR SAFETY PADS. If you are tired and need to rest, you must exit the court.

REMOVE ALL SHARP OR POINTED OBJECTS FROM CLOTHING; all such objects, including keys, must be placed in lockers. Wear appropriate clothing. Clothes must be free of hanging zippers, belts, and strings. Please empty your pockets

JEWELRY, INCLUDING JEWELRY IN BODY PIERCINGS, AND OTHER LOOSE ARTICLES, INCLUDING CELL PHONES, MUST BE REMOVED BEFORE ENTERING ANY JUMP SPACE

NO RUNNING OR RACING ON THE PREMISES AND ESPECIALLY NOT ON THE TRAMPOLINES

ALL JUMPING IS AT YOUR OWN RISK. FLIPS AND OTHER TRICKS ARE DANGEROUS. “The term ‘trick’ includes but is not limited to any feat intended to entertain or amuse, any front flip or forward flip, back flip or backward flip, midget flip, knee flip, back backflip, side flip, cartwheel, spin, off axis jump, 180, 360, clean sweep, knee 360, superman, belly buster, back buster, donkey kick, rodeo 540, misty 720, misty 540, pike grab, corkscrew, handspring, handspring to back flip, or the like. PERFORM FLIPS AND OTHER TRICKS ONLY IF YOU HAVE THE SKILL NECESSARY TO PERFORM THEM SAFELY AND HAVE CERTIFIED BELOW WITH YOUR INITIALS THAT YOU HAVE SUFFICIENT SKILL TO PERFORM THEM SAFELY. THIS PARK IS NOT A PLACE TO LEARN OR EXPERIMENT IN PERFORMING OR ATTEMPTING TO PERFORM SUCH TRICKS. DOUBLE BOUNCING IS STRICTLY PROHIBITED.

NO DIVING INTO THE FOAM PITS OR LANDING ON HEAD, NECK OR STOMACH

BE ALERT; PREVENT COLLISIONS WITH OTHER JUMPERS BY PAYING ATTENTION TO YOUR SURROUNDINGS AT ALL TIMES; Be aware and considerate of those around you

NO CLIMBING ON TRAMPOLINE WALLS, NETS, OR PADDING; DO NOT TOUCH BASKETBALL APPARATUS

NO GUM, FOOD, CANDY, OR DRINK ALLOWED IN THE TRAMPOLINE AREA; you may not have any foreign objects in your mouth while jumping

NO ONE UNDER THE INFLUENCE OF ALCOHOL OR ILLICIT DRUGS WILL BE ALLOWED ENTRY TO THE FACILITY

FALLOUT IS NOT RESPONSIBLE FOR LOST, STOLEN, OR DAMAGED PERSONAL PROPERTY BROUGHT INTO OR STORED ON THE PREMISES

NO ROUGHHOUSING, FIGHTING, CHASING, ETC. No tackling, pushing, or other activity that may unnecessarily interfere with the jumping or concentration of another participant

YOU SHOULD BE IN GOOD HEALTH AND FREE FROM CONDITIONS THAT COULD BE AGGRAVATED BY JUMPING ON A TRAMPOLINE. Consult a physician prior to jumping regarding all medical conditions including, without limitation: asthma, diabetes, high blood pressure, pregnancy, heart conditions, skeletal conditions, etc.

LIMIT YOUR PHYSICAL EXERTION AND REST WHEN YOU BECOME TIRED BEFORE RESUMING

ALWAYS LAND ON A TRAMPOLINE MAT WITH BOTH FEET LANDING AT THE SAME TIME or if you intend to land on your buttocks, land with your back in a vertical (upright) position

NO PROFANITY ALLOWED

This is not an all-inclusive list. Other specific rules for various areas in the park are posted throughout the park (just inside the main entrance to the park, at the entrance to the main court, at the basketball goal apparatus, at the entrance to the Ninja Course, and at the platforms to the Launch Lanes/Foam Pit).

Deviation from any of these rules is a direct violation of policy, and is a sufficient reason to reprimand or expel violator(s).

CERTIFICATIONS BY ADULT PARTICIPANT:

1. By placing my initials at the end of this paragraph, I certify that I am 18 years of age or older. [____] (initials)

2. By placing my initials at the end of this paragraph, I certify that if I have named any minor children or wards above, I am the parent, legal guardian, or authorized custodian of any and all minor children or wards named above and am authorized to execute this Agreement on behalf of each and all of them. [____] (initials)

3. By placing my initials at the end of this paragraph, I certify that I understand (1) that I must read and agree to all of the terms of this Agreement in order to be allowed to participate in the Activities provided by Fallout at its Facility, as set forth below, and (2) that by placing my signature at the end of this Agreement, I will be bound by the terms of this Agreement and that by executing this Agreement I will thereby affect not only my own rights but also the rights of any and all the minor children or wards that I have named above, all as set forth in this Agreement. [____] (initials)

4. By placing my initials at the end of this paragraph, I certify that I, my spouse, my legal partner, and any minor children or wards I have named above (1) are in good health and in proper physical condition to participate in or observe the Activities; (2) are not under the influence of alcohol or any illicit or prescription drugs which would in any way impair my ability or the ability of any of us to safely participate in or observe the Activities; (3) have not been advised against participation in or observation of the activities by a health professional; and (4) understand that it is my sole responsibility to determine whether I, my spouse, my legal partner, and any minor children or wards I have named above are sufficiently fit and healthy enough to participate in the Activities. [____] (initials)

5. By placing my initials at the end of this paragraph, I certify that I, my spouse, my legal partner, and any minor children or wards I have named above, have made ourselves familiar with and agree to abide by and be solely responsible for compliance with the Rules (hereinafter "Rules") established for the Activities, which include without limitation the Rules posted in the Facility, printed above, and posted on the Facility's website at <http://www.falloutjump.com> [____] (initials)

6. By placing my initials at the end of this paragraph, I certify that I, my spouse, my legal partner, and any minor children or wards I have named above accept sole responsibility for our own conduct and actions, and the condition and adequacy of the Facility and of its equipment and amenities. I, on behalf of my spouse, my legal partner, and any minor children or wards I have named above, hereby acknowledge, agree and represent that (1) immediately upon entering into the Facility or participating in or observing any of the Activities I will inspect and carefully consider the Facility; and (2) by participating in any of the Activities or by observing others participating in any of the Activities I thereby acknowledge that I have inspected and carefully considered such Facility and its equipment and amenities and accept same for myself, my spouse, my legal partner, and any minor children or wards I have named above as being safe and reasonably suited for the purpose of such observation, use or participation by myself, my spouse, my legal partner, and any minor children or wards I have named above. [____] (initials)

DESCRIPTION OF ACTIVITIES:

The services provided and Activities allowed by Fallout include entrance to Fallout's Facility located 10000 Coors Bypass NW, Albuquerque, New Mexico (the "Facility") and use of trampolines, foam pits, walkways, stairs, restroom facilities, snack bar, and other amenities located at, and

amusement activities expressly allowed within, the Facility, including the observation of such use by spectators (collectively "Activities").

WARNING OF DANGERS AND ACCEPTANCE OF RISKS ASSOCIATED WITH DANGERS:

I understand that the Activities I wish to engage in are inherently dangerous and hazardous and may result in serious injury or death, either to participants or spectators. I also recognize that injury may result not only from the inherently dangerous activity itself, but also from the negligent act or acts of one or more other persons. Understanding this, I choose to assume the risks associated with participation in the Activities. By placing my initials at the end of this paragraph, I acknowledge (1) that I am voluntarily participating in the Activities; (2) that I am aware of the risks associated with the Activities, which may include, but are not limited to, physical injury, psychological injury, pain, suffering, illness, disfigurement, temporary disability, permanent disability, partial paralysis, complete paralysis, economic loss, emotional distress, and death (hereinafter "Injury"); (3) that I understand that these injuries or outcomes may arise from my own negligence or from the negligence of one or more other persons or from the condition of the Facility; and (4) that notwithstanding my understanding concerning the potential cause or causes of these potential injuries or outcomes, I assume all risks, both known and unknown, of my own participation and of the participation of the above-named minor children or wards in the Activities. [____] (initials)

CERTIFICATION REGARDING FLIPS AND TRICKS:

By placing my initials at the end of this paragraph, I certify (1) that I understand that **FLIPS AND OTHER TRICKS ARE DANGEROUS**; (2) that I understand that the term "trick" as used herein includes but is not limited to any feat intended to entertain or amuse, any front flip or forward flip, back flip or backward flip, midget flip, knee flip, back backflip, side flip, cartwheel, spin, off axis jump, 180, 360, clean sweep, knee 360, superman, belly buster, back buster, donkey kick, rodeo 540, misty 720, misty 540, pike grab, corkscrew, handspring, handspring to back flip, or the like; (3) **that I understand that I am allowed to perform flips and other tricks ONLY IF (a) I HAVE THE SKILL NECESSARY TO PERFORM THEM SAFELY and (b) CERTIFY WITH MY INITIALS IN THIS SECTION THAT I HAVE SUFFICIENT SKILL TO PERFORM THEM SAFELY;** (4) that **I understand that THIS PARK IS NOT A PLACE TO LEARN OR EXPERIMENT IN PERFORMING OR ATTEMPTING TO PERFORM SUCH TRICKS;** and (5) **that I understand that DOUBLE BOUNCING IS STRICTLY PROHIBITED.** [____] (initials)

1. By placing my initials at the end of this paragraph, I certify that I have read the paragraph immediately above, understand it, and understand what constitutes a "trick" as defined above. [____] (initials)

2. By placing my initials at the end of this paragraph, I certify that I have explained or will explain a correct understanding of what constitutes a "trick" as defined above to each and all of the minor children or wards I have named above. [____] (initials)

3. By placing my initials at the end of **one or the other but not both** of the below subparagraphs of this paragraph, I certify that:

EITHER: I and the minor children or wards I have named above do intend to perform one or more "tricks" at this Facility (but none of us will ever double bounce), and I understand that the "Release of Liability" paragraph below and "Waiver of Claims" paragraph below both apply to me and to such minor children or wards if we perform any "tricks" as defined above at this Facility. [____] (initials) [If

checked here, do not check next subparagraph]

OR: I and the minor children or wards I have named above do not intend to perform and will not perform “tricks” at this facility (and none of us will ever double bounce). [_____] (initials)

4. By placing my initials at the end of this paragraph I specifically certify that I and the minor children or wards I have named above have sufficient skill to perform any “tricks” that I and they attempt. [_____] (initials)

RELEASE OF LIABILITY:

By placing my initials at the end of this paragraph, I acknowledge that on behalf of myself, my spouse, my legal partner, and all minor children or wards named above, and on behalf of their respective heirs, successors, and assigns and in consideration of the services and Activities provided by Fallout and by any of The Released And Indemnified Parties, I hereby forever release, remise, acquit, discharge, defend, hold harmless and indemnify each and all of The Released And Indemnified Parties, including Fallout, against any and all claims, suits, actions, causes of action, proceedings, liabilities, damages, sums of money, controversies, judgments, executions, and expenses of any kind whatsoever and however caused, including without limitation any that arise on, are based upon, or result from, any act, event, occurrence or omission on the Premises, including but not limited to reckless, negligent or grossly negligent conduct, whether it be for liability, damages, compensation, or otherwise, brought by me or by anyone on my behalf, including for direct, special, incidental, exemplary, punitive, or consequential damages, or for attorney fees or costs in any proceeding or litigation (hereinafter “Claims”). [_____] (initials)

WAIVER OF CLAIMS:

Furthermore, and without limiting the foregoing, by placing my initials at the end of this paragraph, I acknowledge that I hereby waive on my own behalf and on behalf of my spouse, my legal partner, and all minor children or wards named above, any and all claims that any of us, whether individually or collectively, now or in the future may have against any of The Released and Indemnified Parties, including Fallout, that arise on, are based upon, or result from, any act, event, occurrence or omission on the Premises, and agree not to initiate, not to prosecute, and not to aid any other person or entity in initiating or prosecuting or continuing to assert or maintain any Claim of any kind whatsoever against any of The Released and Indemnified Parties or Fallout in any court or other forum with respect to the matters released or waived by this Agreement, including but not limited to any Claim under common law, statute, regulation, local ordinance or rule, whether in law or in equity, or whether it be federal, state, or local in origin. [_____] (initials)

INJURIES BY AND TO THIRD PARTIES:

By placing my initials at the end of this paragraph, (1) I acknowledge that I, my spouse, my legal partner, and any minor children or wards named above may suffer an Injury caused directly or indirectly by the action or actions of one or more other customers or invitees of Fallout at the Facility (hereafter “Third Parties”) and I agree that in the event of any such Injury, I shall and do hereby release, discharge, waive, defend and indemnify The Released And Indemnified Parties against any Claims arising from acts or omissions of any Third Parties at the Facility; and (2) I acknowledge that acts or omissions by myself, my spouse, my legal partner, and any minor children or wards named above may cause injury to other customers, invitees, employees, independent contractors or agents of Fallout while at the Facilities, and in such event, I agree to defend and indemnify The Released And

Indemnified Parties and any Third Party invitee or customer against any Claim which is or may have been caused, in whole or in part, by me, my spouse, my legal partner, or any minor children or wards named above. [_____] (initials)

PHOTO RELEASE:

By placing my initials at the end of this paragraph, I acknowledge that by entering the Facility and participating in or observing the Activities, I hereby irrevocably grant to Fallout, on behalf of myself, my spouse, my legal partner, and all minor children or wards named above, the irrevocable right and permission (1) to photograph, videotape, and record me, my spouse, my legal partner, or any of the minor children or wards named above in connection with the use by any of them of any of the Facility or the participation in or observance of participation in any Activities by any of them or of others, and (2) to use any such photograph or recording showing, displaying, manifesting, or depicting the name, face, likeness, voice or appearance of me, my spouse, my legal partner, or any of the minor children or wards named above for any and all purposes, in connection with enforcement of the Rules, exhibitions, publicity, advertising, and promotional materials without reservation or limitation, specifically including without limitation, verification by Fallout of any compliance or non-compliance with the Rules by any person and advertising and promotional purposes, without restriction as to alteration, and I further acknowledge that such photographing or recording may be accomplished in any manner and any media now or hereafter known and that this grant of the right to photograph, record and disseminate images and sounds shall persist in perpetuity and for use throughout the world, that I waive any right to inspect or approve the use of any photograph or recording, and that I acknowledge and agree that the rights granted by this release are without compensation of any kind and in consideration of my use or observance of use of Activities at the Facility. [_____] (initials)

TERM OF AGREEMENT:

By placing my initials at the end of this paragraph, I acknowledge that I understand that, unless revoked in a revocation document acknowledged in writing by Fallout, this present Agreement extends forever into the future and will have full force and legal effect each and every time I, my spouse, my legal partner, or any minor children or wards named above enter into the Facility or participate in or observe Activities in the Facility. [_____] (initials)

INSURANCE:

By placing my initials at the end of this paragraph, I certify and represent that I have adequate personal insurance or sufficient personal assets to fully indemnify The Released And Indemnified Parties against any Claims that may arise in favor of me, my spouse, my legal partner, or any minor children or wards named above and against any of The Released And Indemnified Parties for which I have an indemnity obligation under this Agreement and I further certify and represent that I have adequate personal insurance or sufficient personal assets to fully defend, hold harmless and indemnify The Released And Indemnified Parties against any Claims of any Third Party caused in whole or in part by any act or omission of one or more of the Releasing Parties. [_____] (initials)

RULES:

By placing my initials at the end of this paragraph, I acknowledge that I have read and understand all of the Rules for participating in and observing any of the Activities offered at the Facility and agree to abide by any and all such Rules and to be responsible for compliance with those Rules by my spouse, my legal partner, and all minor children or

wards named above, representing and warranting that I and all of them will conduct ourselves, while at the Facility, in a safe and responsible manner so as not to endanger the lives or property of any person. [____] (initials)

BASIS OF BARGAIN:

By placing my initials at the end of this paragraph, I acknowledge that I understand that Fallout would not allow use of the Facility or participation in or observance of any Activities by me, my spouse, my legal partner, or any minor children or wards named above without my agreement to the terms and conditions set forth herein. [____] (initials)

CHOICE OF LAW, VENUE, ARBITRATION, SEVERABILITY:

Without limiting any other provision of this Agreement, including without limitation the Waiver of Claims provisions set forth above, I acknowledge, by placing my initials at the end of this paragraph, (1) that any controversy or claim involving the Facility, the Activities, Fallout, The Released And Indemnified Parties, the Rules, or this Agreement or any of its terms (a) shall be governed by and construed in accordance with the laws of the State of New Mexico, without regard to principles of conflicts of law and (b) shall be submitted to and settled by binding arbitration in Bernalillo County, New Mexico, in accordance with the New Mexico Uniform Arbitration Act, 44-7A-1 NMSA 1978, and (2) that if any portion of this Agreement is found by a court of competent jurisdiction to be unenforceable, the remaining portions shall remain in full force and effect. [____] (initials)

JURY TRIAL WAIVER:

By placing my initials at the end of this paragraph, I acknowledge that I, on behalf of myself and my spouse, my legal partner, and any minor children or wards named above, hereby waive, to the full extent permitted by applicable law, any right any of us may have to trial by jury in any legal proceeding directly or indirectly arising out of or relating to this Agreement, the Activities, the Facility, or any Injury sustained or caused by any person in connection with the Activities or the Facility (whether based on contract, tort, or any other theory), and for myself and any and all of us I further represent and warrant (1) that no representative, agent or attorney of any other party has represented, expressly or otherwise, that such other party would not, in the event of litigation, seek to enforce the forgoing jury trial waiver and (2) that no parties to this Agreement have been induced to enter into this agreement by, among other things, the jury trial waiver set forth in this paragraph, and I further expressly acknowledge, on behalf of myself and all of us that this waiver is made for the express purpose of expediting resolution of any dispute relating to this Agreement, the Activities, the Facility, or any Injury sustained or caused by any person in connection with the Activities or Facility. [____] (initials)

MISCELLANEOUS:

By placing my initials at the end of this paragraph, I acknowledge and agree that this Agreement is intended to be as broad and inclusive as is permitted by the laws of the State of New Mexico and that this Agreement represents the entire understanding of the parties with respect to the matters set forth herein and no subsequent modification is binding unless reduced to writing and signed by the party against whom enforcement is sought. I further acknowledge and agree that all preexisting agreements, subsequent course of performance, or purported oral modifications of the terms of this agreement that purport to establish different consequences for my activities at Airborne’s facilities are null and void. [____] (initials)

PARENT OR GUADIAN LIABILITY WAIVER ON BEHALF OF MINOR:

By placing my initials at the end of this paragraph, I further represent—in addition to my certification above that I am duly qualified as the parent or legal guardian or authorized custodian of the above-listed minor children or wards on whose behalf I execute this Agreement and that I have the authority to execute this Agreement on behalf of those above-listed minor children or wards—that (1) I further agree to be legally bound by the provisions of this Agreement and to indemnify and hold harmless The Released And Indemnified Parties from any Claims that any such above-listed minor children or wards may now have or have arise in the future against any of The Released And Indemnified Parties arising on the Premises or in connection with any Activities and (2) I further agree that if it is determined that I am not the parent or legal guardian or legal custodian of one or more of the above-listed minor children or wards or that I did not have the authority to sign the Agreement on behalf of any one or more such above-listed minor children or wards that I will nevertheless personally defend and indemnify The Released And Indemnified Parties for and from any Claim arising from the participation in or observance of Activities at the Facility by any one or more of such above-listed minor children or wards. [____] (initials)

BY PLACING MY INITIALS AT THE END OF THIS PARAGRAPH, I ACKNOWLEDGE THAT I HAVE READ THIS RELEASE AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. [____] (initials)

BY PLACING MY INITIALS AT THE END OF THIS PARAGRAPH, I HEREBY ACKNOWLEDGE (1) THAT THIS DOCUMENT IS ELECTRONICALLY SIGNED IN ACCORDANCE WITH THE UNIFORM ELECTRONIC TRANSACTIONS ACT [SECTIONS 14-16-1 TO 14-16-19 OF THE NEW MEXICO STATUTES ANNOTATED (1978) AND (2) THAT THIS DOCUMENT IS VALID AND MAY BE ENFORCED IN THE SAME MANNER AS A HAND-INITIALIED AND HAND-SIGNED DOCUMENT THAT EXISTS IN PHYSICAL FORM. I ALSO EXPRESSLY ACKNOWLEDGE THE VALIDITY OF THE USE OF RADIO BUTTONS ON THE INTERNET VERSION OF THIS AGREEMENT TO SIGNIFY THE PLACMENT OF INITIALS AT THE ENDS OF THE PARAGRAPHS AND THE VALIDITY OF THE ELECTRONIC SIGNATURE APPENDED TO THIS DOCUMENT, WHICH WAS MADE BY ME ON THE DATE THIS FORM WAS ELECTRONICALLY SUBMITTED. I FURTHER AGREE THAT I HAVE KNOWINGLY AND EXPLICITLY WAIVED ANY RIGHT TO CLAIM THIS DOCUMENT IS INVALID OR IS UNENFORCEABLE BASED ON (1) THE FACT THAT THIS DOCUMENT EXISTS IN ELECTRONIC FORM OR (2) THE FACT THAT THIS DOCUMENT IS SIGNED ELECTRONICALLY. [____] (initials)

Date: _____

Time: _____

Printed Name of Adult Participant:

Signature: _____