

## RELEASE OF LIABILITY

In exchange for participation in the Escape Room Event organized by AWOL Enterprises, LLC ("Operation Escape Room"), of 3419 Brodhead Rd, Monaca, PA 15061 and/or use of the property, facilities and services of Operation Escape Room, I agree for myself and (if applicable) for the members of my family, to the following:

1. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by Operation Escape Room, or the employees, representatives or agents of Operation Escape Room.
2. I recognize that there are certain inherent risks associated with the above described activity and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge Operation Escape Room for injury, loss or damage arising out of my or my family's use of or presence upon the facilities of Operation Escape Room, whether caused by the fault of myself, my family, Operation Escape Room or other third parties.
3. I agree to indemnify and defend Operation Escape Room against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities of Operation Escape Room.
4. I agree to pay for all damages to the facilities of Operation Escape Room caused by my or my family's negligent, reckless, or willful actions.
5. Any legal claim that may arise from participation in the above shall be resolved under Pennsylvania law.
6. I agree that Operation Escape Room, or the employees, representatives or agents of Operation Escape Room, has the right to any photos or any video/sound footage of me during the Operation Escape Room event. These photos, video footage, and sound materials may be used for any marketing purposes.
7. I agree and acknowledge that I am under no pressure or duress to sign this Agreement and that I have been given a reasonable opportunity to review it before signing. I further agree and acknowledge that I am free to have my own legal counsel review this Agreement if I so desire. I further agree and acknowledge that Operation Escape Room has offered to refund any fees I have paid to use its facilities if I choose not to sign this Agreement.

**I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I FURTHER UNDERSTAND THAT BY SIGNING THIS RELEASE, I VOLUNTARILY SURRENDER CERTAIN LEGAL RIGHTS.**

Print Participant's Name	Participant's /Guardian Signature	Date
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