

Infinite Bounds Guest Waiver

(This waiver is good for 1 year)

Guest: _____

Date: _____

I, guardian of the participant (guest name) _____, hereby release **Infinite Bounds** and its agents or Representatives of liability for any personal injury the participant arising out of participation at this event. In the event of a medical emergency, I authorize the agents of **Infinite Bounds** to use their discretion in securing proper treatment for this participant, deemed necessary under the circumstances.

Parent/Guardian Signature

Emergency Contact Cell Phone

(Email Address)

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