



Bounce-House Release Form

Child's Name: _____ DOB: _____

The option to rent a Bounce House to celebrate birthdays comes at the expense of parent planning a birthday celebration. In addition, the center reserves the right to use a Bounce House for special events. Children will always be directly supervised while on campus.

By signing this form, I understand that it is the intent of AHCC to provide safety and protection for my child at all times, including use of Bounce House.

I understand that my child will be under supervision at all times while playing on the playground equipment or in the Bounce House. This acknowledgement of risk and waiver of liability, being understood completely, is signed voluntarily.

Parent Signature: _____
Date

Parent Print Name: _____

****Please Note:** This signed form will be in effect until otherwise changed by parent in writing.