

GENERAL LIABILITY RELEASE, WAIVER, EXPRESS ASSUMPTION OF RISK

PLEASE READ AND BE CERTAIN YOU UNDERSTAND THE IMPLICATIONS OF SIGNING AS THIS DOCUMENT AFFECTS YOUR RIGHTS.

The Haunted Castle is intended for your enjoyment and entertainment. It is meant to scare, frighten, and alarm you; the Haunted Castle is poorly lit with multiple obstacles, structures, enclosures, installations, costumed monsters, and other people/visitors that are potential hazards. The risk of injury or loss from the activities involved is significant and could result in permanent mental or bodily injury, and death.

I hereby swear and affirm that I am at least eighteen (18) years of age, and willfully and voluntarily choose to sign this GENERAL LIABILITY RELEASE, WAIVER, AND EXPRESS ASSUMPTION OF RISK AGREEMENT (hereinafter, the "Agreement"), enter into The Haunted Castle, and freely participate or not participate in any activities, attractions, or interactions contained therein, including but not limited to, the Haunted Castle.

I hereby affirm that I have been advised and thoroughly informed of the apparent and inherent hazards, risks, dangers, and harms associated with the activities generally described as, but not limited to, stationary attractions, mobile attractions, amusement rides, amusement installations, running indoors, bright lights, flashing lights, darkness, unstable platforms, uneven floors, loud music or noises, "Haunted Houses," costumed monsters/actors, obscene and violent images, or other activities that may generally be associated with Halloween.

I understand and acknowledge that I am entering and/or participating in the HAUNTED ACSTLE AT MY OWN RISK and with the knowledge and understanding that doing so involves certain inherent or hidden risks including, but not limited to: dizziness; nausea; fatigue; fainting; vomiting; loss of vision; bruising; cuts; abrasions; bleeding; shock; electrocution; bodily injury; loss of limbs or digits; spinal injuries; hearing loss; dental injuries; fractured or broken bones; facial injuries; difficulty breathing; asthma attacks claustrophobia; HEART ATTACK; MISCARRAGE; EPILEPTIC EPISODES; SEIZURES; HEART ISSUES/PALPITATIONS; ANXIETY; MENTAL EPISODES; DISABILITY; PARALYSIS; and, DEATH.

I KNOWINGLY, FREELY, AND EXPRESSLY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM MY OWN NEGLIGENCE, THE NEGLIGENCE OF THE HAUNTED CASTLE and/or all current and former affiliated corporations, parent corporations, subsidiary companies, partnerships, divisions, current and former incorporators, owners, stock holders, board members, officers, employees, agents, legal representatives, landlords heirs, assigns, and other participants (referred through as "Releases"), and voluntarily and willingly agree to assume full and complete responsibility for my participation in the Haunted Castle.

I KNOWINGLY, FREELY, AND EXPRESSLY WAIVE my right(s) to any and all actions, suits, demands, losses, liability, claims, or causes of action that can be alleged or brought under the laws, codes, and statutes of any and all state, federal, foreign, local or territorial jurisdictions for personal injury, property damage, wrongful death, negligence, loss of consortium, or any other losses/injuries.

By signing this Agreement, I understand and agree that under no circumstance will, my heirs, executors, administrators, beneficiaries, devisees, friends, family, or assigns, prosecute or bring any actions, suits, demands, losses, liability, claims, or causes of action that can be alleged or brought under the laws, codes, and statutes of any and all state, federal, foreign, local or territorial jurisdictions in accordance with the paragraph above against the Releases. Further, I understand and agree that in the event that one or more of the provisions of this agreement, for any reason, is held to be invalid or unenforceability, any such invalidity, unenforceability, or illegality shall not otherwise affect any other provision herein.

I HAVE FULLY READ THIS GENERAL LIABILITY RELEASE, WAIVER, AND EXPRESS ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND AND AGREE TO ALL OF ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UPSUBSTANTIAL RIGHTS BY SIGNING IT.

PARENTS/GAURDIANS OF PARTICIPANT OF A MINOR (UNDER AGE 16). By signing this agreement I verify that I am the parent/guardian with legal responsibilities and obligations to do so, consent and agree to his/her release, waive, and expressly assume the risks as provided above as to all of the Releases from any and all liability, losses, injuries, incidents, or death to my minor child/children involvement and participation in the activities contained within the Haunted Castle as set fully set forth above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

[Sign] _____ [Print] _____ _____
Participant/Parent/Guardian Date

MINOR CHILD/CHILDREN

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

HAUNTED HEMPSTEAD HOUSE RULES OF CONDUCT

- 1.) NO BAGS OR BACKPACKS ALLOWED – LOCK THEM IN YOUR CAR.
- 2.) NO FOOD OR BEVERAGES.
- 3.) NO CELL PHONES, PHOTOS, OR VIDEOTAPING.
- 4.) NO TOUCHING THE ACTORS, PROPS, OR SCENERY.
- 5.) NO TALKING DURING SCENES.
- 6.) NO HARASSING OR ENDANGERING THE ACTORS.
- 7.) NO SHARP OBJECTS.
- 8.) NO RUNNING.
- 9.) STAY WITH YOUR GROUP.
- 10.)DO NOT OPEN DOORS UNLESS INSTRUCTED.
- 11.)MOVE TO NEXT SCENE WHEN INSTRUCTED.

Violation of these rules will result in your immediate removal from premises with no refund.

I have read these rules and fully understand and agreed to abide by them.

(Sign) _____

(Print) _____

(date) _____

Minor child/children

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____