WAVIER OF RESPONSABILITY

PERSONAL INFORMATION OF THE MINOR	
Name	Last name
Date of birth DD / MM / YYYY	Place of birth San Francisco, California, USA .
Town of Residence Caravita	Street Address Via Guantai Nuovi, 22
ZIP 80040 Province Napoli	Phone +39 000 000 0000 .
E-mailExample@email.com	
PERSONAL INFORMATION OF THE PARENT/GUARDIAN	
⊠ Parent □ Guardian	
NameJohn	Last name
Date of birth DD / MM / YYYY	Place of birth <u>Brooklyn, New York, USA</u> .
Town of Residence Caravita	Street Address <u>Via Guantai Nuovi, 22</u> .
ZIP 80040 Province Napoli	Phone +39 000 000 0000 .
E-mail <u>Example@email.com</u>	
I DECLARE	
	nd regulations and I unconditionally accept the rules and regulations
of JUMP HEAVEN and PLAY WILY. I also accept the right of the JUMP HEAVEN staff to remove me from the facility in case of	
non-compliance with the rules or instructions given by the staff. 2. To assume, as of now, civil and criminal liability for any and all conduct that does not comply with the JUMP HEAVEN rules,	
is contrary to any applicable law and/or causes personal injury to myself and/or third parties and/or property and/or the JUMP	
HEAVEN facility. 3. To be in a psychophysical condition suitable for non-competitive sports activities.	
4. To be aware of the foreseeable and unforeseeable risks associated with participation in JUMP HEAVEN activities.	
5. Not to be under the effect of drugs, not to have taken and not to take in the 48 hours preceding the activity psychotropic	
substances and/or drugs.	
6. I have not overindulged in food and beverage consumption.	
7. My heirs and/or assigns, to relieve JUMP HEAVEN, its employees and/or collaborators, as well as their heirs and/or	
assignees from any liability for injury and/or any damage (including third party cause), should result to my person in conjunction with and because of the activity carried out at the facilities of JUMP HEAVEN.	
8. That I have carefully read and evaluated the contents of this document and that I clearly understand the meaning of each	
point before signing it. I fully understand and agree with the purposes of these rules established for my safety, I accept that	
failure to comply with them may put both me and my companions in a dangerous situation. For the purposes of Articles 1341	
and 1342 of the Civil Code, I declare that I specifically approve points 1,2,3,4,5,6,7 of this writing.	
Date DD / MM / VVVV	nature (leggible) john doe
Date <u>DD / MM / YYYY</u> Sigi	nature (leggible)
a) The undersigned, having read the information pro	ovided by the owner of the treatment pursuant to art. 13 GDPR on
the processing and communication of personal d	ata (common, sensitive, and judicial) carried out by him, with the
purposes related to the fulfillment of the contractual relationship and the related legal obligations, being aware that in	
the absence of consent to these treatments, the owner will not be able - on the one hand - to fulfill its legal obligations	
and therefore constitute or continue the contractual relationship - on the other - to carry out its typical activity. b) To the treatment, including the communication to the subjects of which to the point 8 of the informative presentation in	
b) To the treatment, including the communication to the subjects of which to the point 8 of the informative presentation in reception, of the own personal data, for the purpose and in the limits indicated in the informative to the point 4 and to	
the point 1.	so and in the initio indicated in the informative to the point 4 and to
	e subjects referred to in point 8 of the information in reception and
transfer outside the European Union, of personal data and images of the person concerned for the purposes and	
within the limits indicated in the information in poi	nt 2. You also authorize the use and dissemination by the company,
images of the member filmed or taken during the	activities promoted by the company.
a) ⊠ I Consent	
b) ⊠ I Consent	
c) 🗵 I Consent	
,	, , ,

Signature (leggible)_

Date DD / MM / YYYY