



D.O.A. PRODUCTIONS, LLC RELEASE AND WAIVER AGREEMENT

These activities and events can or could result in injuries to the participant. To be able to participate in these events, the participant, by executing his or her signature (electronic or otherwise) to this release, does hereby release, waive, discharge and covenant not to sue D.O.A. PRODUCTIONS, LLC , its officers, members, promoters, owners, employees, or business partners from any and all liability, injuries, or any and all other claims and damages as a result of participating in an event sponsored by D.O.A. PRODUCTIONS, LLC, its officers, members, owners, employees, or business partners. Furthermore, the participant, on behalf of his personal representatives, assigns, heirs, and next of kin, does hereby release any and all claims, damages, injuries, incurred by the participant in regards to the participation in such events. Participants agree to hereby release any and all claims, of whatever kind of nature, present and future, damages and injuries. I comprehend the risks involved with participating as a spectator or participant. I assume all risks associated with participating in the DOA ROOM ESCAPE including paralysis and death caused by course and contact with other participants or actors. I agree that D.O.A. PRODUCTIONS, LLC or any of its assigns has the right to any photos or any video/sound footage of me during the DOA ROOM ESCAPE event. These photos, video footage and sound materials may be used for any marketing purposes. I fully understand that there are no refunds under any conditions once I purchase my ticket. Participant further states that he or she has carefully read the above release and knows the contents of the release and signs this release as his or her own free act. Participant further releases, waives, discharges and covenants not to sue all professional services from any claim whatsoever on account of first aid,treatment or service rendered him or her during participation inDOA ROOM ESCAPE or any activities in connection with DOA ROOM ESCAPE, whether by negligence or not. Under no circumstances is a client or participant eligible for a refund regardless of injury before the event. I agree by signing this document and participating in the DOA ROOM ESCAPE events that I lose my right to sue any and all parties involved with the DOA ROOM ESCAPE including and not limited to the property owners of the location. If any claim is submitted as a result of my conduct as a participant, spectator, or bystander at DOA ROOM ESCAPE I agree to defend and indemnify the Released Parties from any and all claims or causes of action by whomever or wherever made or presented as a result of my alleged misconduct as a participant, spectator, or bystander. Moreover, if such claims are made as a result of my conduct, I agree to pay for the legal fees, expenses, and costs incurred by the Released Parties in defending such claims against them as a result of my alleged misconduct. Non-compete: I agree that I shall not directly or indirectly, for my own benefit or for

any other person, firm or corporation whatsoever other than D.O.A.PRODUCTIONS, LLC, engage in any business that directly involves DOA ROOM ESCAPE GAMES and that competes with D.O.A. PRODUCTIONS LLC, within 24 months.I understand that DOA ROOM ESCAPE GAMES are not recommended to expectant mothers, and those with heart conditions,hypertension, claustrophobia or similar conditions. You will be required to stand for at least one hour.I also understand that I have to abide by the "Game Rules" as attached for my own safety. I agree to use the facilities in DOA ROOM ESCAPE with care. D. O. A. PRODUCTIONS LLC, reserves all rights to seek indemnification should there be any deliberate attempt to cause damage of the building, props, equipment, and layout. I also understand that D. O. A. PRODUCTIONS, LLC may terminate the game at any time should any of the participants decline to abide by the "Game Rules" or follow the instructions of D. O. A. PRODUCTIONS, LLC employees. There will be no refund of fees, full or partial, allowed.

CHILDREN'S RELEASE: For all persons under eighteen (18) years of age a parent or legal guardian must sign the following acknowledgment. The undersigned parent and natural or legal guardian hereby acknowledges that he/she has executed the foregoing Release for and on behalf of the minor named herein and agree to bind myself, the minor,his/her executors, administrators , heirs, next of kin, successors, and assigns to the terms of the foregoing Release. I hereby authorize any licensed physician,emergency medical technician, hospital or other medical or health care facility to treat the minor named herein for the purpose of attempting to treat or relieve such injuries. I consent to the administration of all medical care. By signing this agreement I agree that I or the part of my responsible party lose my/our right to sue anyone involved with the DOA ROOM ESCAPE WHEN REGISTERING ONLINE, MY ONLINE SIGNATURE SHALL SUBSTITUTE FOR AND HAVE THE SAME LEGAL EFFECT AS IF I HAD SIGNED A WAIVER AND RELEASE AGREEMENT. PARTICIPATION WILL BE DENIED IF THE SIGNATURE OF AN ADULT PARTICIPANT OR PARENT AND DATE ARE NOT SIGNED AT THE TIME AND PLACE OF THE EVENT.