



ATTACHMENT NO. 4 – TEMPLATE OF A STATEMENT OF THE ORGANIZED GROUP SUPERVISOR

Statement of the Supervisor of a Group Using Jumpy Trampoline Park in Piaseczno

I, the undersigned:

FULL NAME:.....

DATE OF BIRTH:.....

PHONE NUMBER:.....

I declare that I am the supervisor of the group and that I bear responsibility for the behavior of the participants under my care.

I HEREBY UNDERTAKE TO:

- PROVIDE CARE, OBSERVATION, AND SUPERVISION OF THE PERSONS LISTED BELOW (HEREINAFTER REFERRED TO AS THE PARTICIPANTS) FOR THE ENTIRE DURATION OF THEIR STAY ON THE PREMISES OF THE TRAMPOLINE PARK;
- FAMILIARIZE THE PARTICIPANTS WITH THE REGULATIONS APPLICABLE ON THE PREMISES OF THE TRAMPOLINE PARK AND ENSURE THAT THEY ARE COMPLIED WITH;
- CONDUCT A HEADCOUNT OF THE PARTICIPANTS IN THE PRESENCE OF A TRAMPOLINE PARK EMPLOYEE IN ORDER TO VERIFY THE NUMBER OF PARTICIPANTS BOTH BEFORE AND AFTER THE USE OF THE TRAMPOLINE PARK BY THE PARTICIPANTS.

I DECLARE THAT::

- THE HEALTH CONDITION OF THE PARTICIPANTS UNDER MY CARE ALLOWS THEM TO USE THE TRAMPOLINE PARK;
- I HAVE OBTAINED THE REQUIRED CONSENT OF THE PARENTS OR LEGAL GUARDIANS OF ALL PARTICIPANTS, COVERING: THE USE OF THE TRAMPOLINE PARK ATTRACTIONS BY ALL PARTICIPANTS, AND AUTHORIZATION TO ACCEPT THE REGULATIONS OF THE TRAMPOLINE PARK ON THEIR BEHALF.

LIST OF PERSONS IN THE GROUP (FULL NAME AND DATE OF BIRTH):

- 1....
- 2....
- 3....
- 4....
- 5....
- 6....
- 7....
- 8....
- 9....
- 10....

DATE AND SIGNATURE OF THE GROUP SUPERVISOR:.....