Foam Party Parent/Guardian Waiver

The Party Emporium LLC

I, the undersigned parent or legal guardian, give permission for my child to participate in the foam party activity provided by **The Party Emporium LLC**.

I understand that foam party activities may include running, playing, water/foam exposure, slippery surfaces, outdoor conditions, and other normal play-related risks. I understand that minor slips, falls, skin irritation, eye irritation, wet clothing, or other minor injuries may occur.

Foam Solution Information:
The foam used for this event is made using **PartyMachines Dr. Party Foam Powder Pack**, mixed with water and used in a foam machine. Parents/guardians are welcome to look up the product information before signing or allowing their child to participate.

The product listing states that the foam powder is **hypoallergenic, peanut-free, animal-cruelty free, environmentally friendly, and dermatologist certified**. The foam is intended for outdoor foam machine use only.

Parents/guardians should be aware that, like any soap-based or bubble-style product, foam may cause minor eye, skin, or breathing irritation for some children, especially those with sensitive skin, allergies, asthma, or other medical concerns. Children should avoid eating, drinking, or rubbing the foam into their eyes.

I confirm that my child does not have any known allergies, skin sensitivities, breathing issues, or medical conditions that would prevent them from safely participating in a foam party.

I agree that my child will follow event rules and instructions from staff or volunteers. I understand that a child may be asked to leave the foam area if they are playing unsafely.

By signing this form, I release and hold harmless **The Party Emporium LLC**, the event host, staff, volunteers, and any related parties from liability for injuries, damages, or losses that may occur during participation, except where prohibited by law.

Child's Name: _____ Child's Age: _____

Parent/Guardian Name: _____ Phone: _____

Allergies/Medical Concerns:

_____

_____

Photo Permission:

[ ] Yes, my child may be included in event photos/videos. [ ] No, please do not photograph my child.

Parent/Guardian Signature: _____ Date: _____