

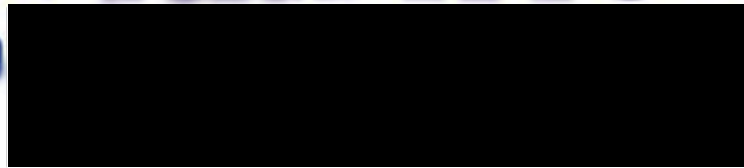


justin 16

**celebrate los angeles
feb 27, twenty-eight
& the big bash on march 1st
stay - all - weekend**

food fun friends!

RSVP ASAP TO



SWIMMING POOL - JACUZZI - BASKETBALL COURT - SUMO
WRESTLING - AIR HOCKEY - POOL TABLE - ON CALL CHEF
KARAOKE - ROCKBAND - WII - XBOX - PLAYSTATION - IN HOUSE
WORKOUT GYM - TENNIS COURT - PAINTBALL
PRIVATE MOVIE SCREENING FEATURING SOME OF HOLLYWOOD'S
CURRENT BOX OFFICE FILMS

SATURDAY, FEBRUARY 27TH

GUEST ARRIVE - DINNER AT [REDACTED]

SUNDAY, FEBRUARY 28TH

[REDACTED] - PRIVATE MOVIE
SCREENING FOR BOOK OF ELI

MONDAY, MARCH 1ST

BIRTHDAY BASH FOR JB

BACKYARD POOL BBQ - KARAOKE - SUMO WRESTLING - NIGHT
LASER TAG
DJ & SPECIAL GUEST APPEARANCE

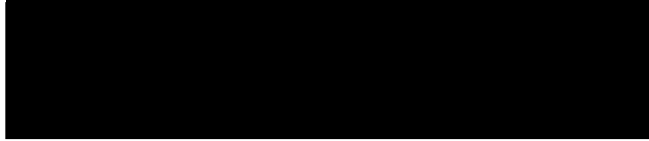
FOR SECURITY REASONS LOCATION IS DISCLOSED
PLEASE CONTACT ME FOR DETAILS AT [REDACTED]

**PLEASE NOTE: THE ATTACHED RELEASE MUST BE SIGNED &
RETURNED FOR ALL CHILDREN UNDER THE AGE OF 18, SECURITY
IS PROVIDED AND WILL BE ON STAFF AT ALL TIMES, THE ESTATE
WILL BE DRY FROM ALL ALCOHOLIC BEVERAGES, THERE IS TO BE
NO SMOKING ON THE PREMISES (BOTH INDOOR AND OUTDOOR)**

***PLEASE RSVP AND SEND WAIVER AND RELEASE FOR MINORS (IF
APPLICABLE) TO : [REDACTED]***

FOR THOSE ATTENDING FROM OUT OF STATE
TRANSPORTATION WILL BE PROVIDED UPON ARRIVAL AT THE
AIRPORT ON FEBRUARY 27TH TO THE [REDACTED] AS WELL
AS RETURN TRANSPORTATION TO THE AIRPORT FROM THE
ESTATE ON DEPARTURE DATE

EMERGENCY CONTACTS



Waiver and Release Agreement for Minors

I, the undersigned participant/parent, request *voluntary participation* for myself /minor to participate in the _____ activity on _____ (date) which begins, approximately, at _____ (time) and ends, approximately, at _____ (time) sponsored by _____ all of which are hereinafter referred to as the "activity".

I consent to my/minor's participation in the activity and acknowledge that the minor and I fully understand my/minor's participation may involve risk of serious injury or death, including losses which may result not only from my/minor's own actions, inactions or negligence, but also from the actions, inactions, or negligence of others, the condition of the facilities, equipment, or areas where the event or activity is being conducted, including travel to and from the activity, and/or the rules of play of this type of event or activity. I further understand that if I have any risk concerns, I should discuss the risks associated with my/minor's participation with the activity coordinators and event staff, before I sign this document and before the activity begins and that by executing below, I represent and warrant that I have, in fact, conducted all inquiries and investigated all situations and contingencies and, unconditionally, approve and authorize my/minor's participation, in full and without reservation, in the activity.

I certify that my/minor is in good health and have no physical condition that would prevent participation in the activity. Furthermore, I agree to use my/minor's personal medical insurance as a primary medical coverage payment if accident or injury occurs. I consent to emergency medical treatment in the event such care is required.

Knowing and understanding the risks involved with participation in the activity, I hereby voluntarily and willingly assume responsibility for all risks and dangers associated with my/minor's participation in the activity. I agree I am financially responsible for any losses resulting from my/minor's actions and will indemnify the Property Owners, _____, Events At Universal Locations, LLC, G P Events, and the officers, directors, employees and agents of each of them, for any loss or damage caused by myself/minor during this activity.

In consideration of my/minor's participation in the activity, I hereby waive all claims or causes of action against Property Owners, _____, Events At Universal Locations, LLC, G P Events and the officers, directors, employees and agents of all of them, arising out of my/minor's participation in the activity and hereby release, hold harmless, and discharge the Property Owners, _____, Events At Universal Locations, LLC, G P Events, and the officers, directors, employees and agents of each of them from all liability in connection therewith.

I and my/minor also understand and agree that bringing alcohol or illegal drugs onto the Premises or the use of alcohol or any illegal drugs in any manner related directly or indirectly to the activity will be grounds for immediate eviction of my/minor from the Premises and dismissal from the activity with no refund of payment of any kind.

I have read this release and hold harmless agreement and understand the terms used in it and their legal significance. This waiver and release is freely and voluntarily given with the understanding that right to legal

recourse against the Property Owners, _____, Events At Universal Locations, LLC, G P Events, and the officers, directors, employees and agents of each of them is knowingly given up in return for allowing my/minor's participation in the activity. My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators, and assigns.

Please utilize the space below to provide any medical/prescription information that you request be released to emergency medical providers.

Emergency contact name (print) (Area code) Phone number

Relationship to the participant

List medical/prescription information below:

Participant's signature date

Parent's signature (required) date

Participant's Name (print) (Area code) Phone number

Address City/State Zip

WITNESS (must be at least 18 years old)

Signature date



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