

Disclaimer

Thank you very much for visiting CHILDHOOD (hereinafter referred to as “this facility”), operated by Date Environmental Management Co., Ltd. (hereinafter referred to as “this Company”).

Regarding your visit to our facility, please review the precautions below, agree to the “Consent Form,” and provide your address, contact information, and signature. This consent form applies to all attractions within this facility. Please note that if you do not agree to these terms (if you do not check all the boxes below), you will not be able to participate in the activities at our facility.

Please note that if you do not agree to these terms (if you do not check all the boxes (☐) below), you will not be able to participate in the activities at this facility.

Important Notes

- Please note that the content of attractions within this facility may be changed or canceled without prior notice due to bad weather or other circumstances.
- Visitors who fail to follow safety rules or staff instructions at any attraction within this facility may be denied entry or asked to leave the attraction midway through the experience.
- Persons who are not feeling well, those with physical or mental illnesses or suspected conditions, or anyone else whose condition may interfere with the experience of any attraction within this facility are not permitted to participate.
- Regarding the outdoor buggy ride experience within this facility, from the perspective of ensuring customer safety, **we may refuse participation to anyone whom we determine may interfere with normal operation or is suspected of doing so.**
- Anyone who fails to follow the instructions of our staff**, or who commits acts of violence, intimidation, or other illegal acts against our staff, or who makes excessive demands without just cause, uses abusive language, or engages in other inappropriate behavior, **will be asked to leave this facility** for the sake of ensuring the safety of all guests and this facility as a whole. In such cases, **we will not refund any admission fees or other charges** paid by the guest.

Consent Form

I and the accompanying person listed on the other side (hereinafter referred to as “we”) have reviewed the “Important Notes” above and agree to the following terms.

- We have reviewed the “Important Notes” above and acknowledge that we understand and accept them.
- We will use this facility after reviewing, understanding, and accepting the contents of the “Important Notes for Facility Use.”
- We are in good health and are not currently receiving medical treatment for any illness or condition that would interfere with our ability to experience the attractions within this facility.
- In the event that we cause damage to a customer due to reasons attributable to us (in cases of willful misconduct or negligence), we will compensate for such damage. However, except in cases where we are found to have acted with willful misconduct or gross negligence, the amount of compensation shall be limited to the amount of the admission fee received from the customer.
- We **shall not be liable** for damages arising from **theft or loss of personal belongings, conflicts or disputes between guests**, failure to comply with facility rules or staff instructions, natural disasters, or any other causes not attributable to us (i.e., where there is no intent or negligence on our part). Furthermore, in such cases, we **will not refund any admission fees or other charges** paid by guests.
- If we **damage or lose any structures, facilities (including vehicles such as buggies), or equipment within this facility due to causes attributable to us (i.e., in cases of willful misconduct or negligence)**, we will promptly notify the facility staff and **compensate the company for all damages incurred, including repair costs and all other expenses (including reasonable attorney’s fees).**
- We have read, understood, and agreed to the “Privacy Policy.”

Month Day 20 (Year)

Name of Representative

[*There is a space to fill out on the other side.]

Month Day 20 (Year)

Name of Representative _____ Date of Birth: Month Day 20 (Year) (\ y. o)

① [Admission Category]: Adult / Student (University / College / High School / Junior High School) Elementary School / Preschool / Visit

Address 〒 _____ Contact number _____

Hokkaido/ Prefecture _____

Name of Companion _____ Date of Birth: Month Day 20 (Year) (\ y. o)

② [Admission Category]: Adult / Student (University / College / High School / Junior High School) Elementary School / Preschool / Visit

Address 〒 _____ Same as the representative Contact number _____

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