EXHIBIT I

- Injury [redacted]

1° Call came in over the radio, ran out to the main court and saw the customer with the tatered leg and asked if an ambulance was called and it was. Tried to keep him as calm and comfortable as possible till the EMT'S arrived. Was in pain for obvious reasons. The overall procedure went very smooth as far as the IR and Ice. After he was taken away the tramp was looked at to see if we could piece together the incident that occured. At the same time the Clean up of the Biohazard was taking place. At that time I proceded to leave b/c Vedran had everything under control.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Lia
Employees present: Mason
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 29 / 09
Time:

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: customer complained their was something under trampolines. Mason brushed off comment so customer hit pallet & cut foot badly.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

Jerry took customer to hospital.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Xua
Employees present: Jesse / Robin
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 15 / 09
Time: 6:25

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home)_____ **(Cell)**_____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child:_____ **Relationship:**_____
Phone Number: (Home)_____ **(Cell)**_____

HOW IT HAPPENED: Her foot went under the yellow pad and she felt in trap.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 6:50
What time did they arrive?: 6:58

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:**_____

COMMENTS:

8/31

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: [illegible]
Employees present: Patrick.
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 16 / 09
Time: 6:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: a Friend's Mom
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: wall flip & landed on yellow pad

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport [redacted]
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC / SEA
MOD: Don
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 , 19 , 2009
Time: 8:02 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: ____
Name of Adult accompanying child: ____ Relationship: ____
Phone Number: (Home) ____ (Cell) ____

HOW IT HAPPENED: [redacted] did a flip and came down on his back and knocked himself in the mouth. the split his upper lip opened pretty bad.

PARAMEDICS CALLED: YES or NO (circle one)

What time: ____
What time did they arrive?: ____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: father Tel: ____

COMMENTS:

Mon Court

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 20 / 09
Time: 2:25 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Came down on back and kneed himself in the mouth Cut his lip and his knee

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Party for [redacted].

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 , 20 , 09
Time: 3.30p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: Nancy Mlodi **Relationship:** Mother
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Did a flip and landed on his back or neck He was moving feet and hands

I asked the parents & I needed to call for help and they said "no". Then they called emergency help themselves

PARAMEDICS CALLED: YES or NO (circle one)
What time: 3.50p
What time did they arrive?: 4:00p

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD:

Employees present:

Waiver Attached (Circle one): YES or NO

9/17

Date of Injury: 9/25/09

Time: 1:06

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: knee in face, split under eye open. in trampolin

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Lio
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9.25.09
Time:

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumped & landed wrong on ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 26 / 09
Time: 8:45

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: [redacted] **Relationship:** Youth Group Pastor
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumped into foam pit, possibly hit knee on face. Can't remember arriving at Sky High. Feels very dizzy.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport mother
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: [illegible]
Employees present: Nick / Victor
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 26 / 09
Time: 9 55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Tried to do a flip & kicked out knee.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 27 / 09
Time: 12:15 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO If Yes by whom?: mother - [redacted]
Name of Adult accompanying child: n/a Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: was doing a double front flip. when landed knee hit face in nose. Nose bled and he felt dizzy. pain in nose and head.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 30 / 09
Time: 9 30

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** (YES) or NO
Address: _____
Phone Number: (Home) [redacted] **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Flipped on the trampoline landed on knee. Nose Bleeding

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: LIA / DON / TERESA
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 3 / 09
Time: 4 30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Slipped on dodge ball court. Family said he may have tripped on pads. Leg looked like it may have been broken

PARAMEDICS CALLED: YES or NO (circle one)
What time: 4:50 pm
What time did they arrive?: 4:00 pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Family was very nice and said they would be back.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: DCN
Employees present: Patrick / Ryan
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 3 / 09
Time: 11:45 pm

Name of Guest: [redacted] ([redacted])
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** Rode with friends
Name of Adult accompanying child: [redacted] **Relationship:** friend
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Landed on wrist or back, said hard was hurting me with wrist bar. She refused to let me call for an ambulance until we spoke with her mother

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 11:55 pm
What time did they arrive?: 12:00 pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: DON
Employees present: Sarah
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 9 / 2009
Time: 2:05 pm Check in 01:34 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friends.
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Flipping into foam pit, knocked himself in the nose.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Mike / Lia / Judi
Employees present: Gray /
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 09 / 09
Time: 4pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: N/A **Relationship:**
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Jumping off the wall, his toe caught the edge of a red pad & bent sideways

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: N/A
What time did they arrive?: N/A

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:
*Not in pain
*Customer in good spirits
*

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 9 / 09
Time: 6:07

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Front flip off the wall. twisted ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Mike / Lia
Employees present: Dominic
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 16 / 09
Time: 8:46 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** Friend's Parent [redacted]
Name of Adult accompanying child: N/A **Relationship:** ✓
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping up/down on dodgeball, was accidentally double-bounced

PARAMEDICS CALLED: YES or NO (circle one)
What time: N/A
What time did they arrive?: N/A

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Customer was in good spirits, said the pain has reduced as time went on.

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Lia
Employees present: Kevin/Bobbie
Waiver Attached (Circle one): YES or NO

Date of Injury: 10/16/09
Time: 8:50

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: [redacted]
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Rolled ankle while jumping

PARAMEDICS CALLED: YES or NO (circle one)
What time: 8:50
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Mike/Lia/Don
Employees present: Alvi, Mason, Sterling, Alex, Maggie
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 18 / 2009
Time: 3:30pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: _____ **Relationship:** DAD
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: Was attempting a front flip off of a wall trampoline and hit the floor trampoline still tucked, causing his knee to impact his nose.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: N/A
What time did they arrive?: N/A

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] (DAD) **Tel:** See Above

COMMENTS:
*Customer says "it doesn't really hurt, it just feels really weird"
*Not Really in pain.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Mike
Employees present: Andrew
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 22 / 09
Time: 7:6pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Jumping up/down landed wrong on side of foot; rolled ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:
* Customer was in good spirits
* didn't feel much pain.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD:

Employees present:

Waiver Attached (Circle one): YES or NO

Date of injury: 10 / 25 / 09

Time: 6:40 pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Fell wrong on his ankle. was bruising when I got there and he couldn't move his foot. when he picked his leg up his foot kinda flopped to the side. It didn't look right so I stood it up all and he told me that he would get to the hospital and left with his family

PARAMEDICS CALLED: **YES or NO (circle one)**

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 25 / 2009
Time: 7:50 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: landed on bad way and had alot of swelling on her right ankle have ice and five pass

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Don \ Teresa
Employees present: Josh \ Victor \ Nik
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 28 / 09
Time: 6:25 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Rolled ankle while jumping on walls. Rolled ankle. Iced or walking looked bruised.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 6:27pm
What time did they arrive?: 6:31 pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Teresa
Employees present: Aeden O'Neil-Dunne
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 31 / 09
Time: 3:00 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present? (circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: mom
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: jumped into foam pit and hit his nose with knee.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:
(Mom)

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Teresa, Don
Employees present: Aeden O'neil Dunn, Patrick Kelly
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 1 / 09
Time: 2:29 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home)_____ (Cell)_____

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home)_____ (Cell) [redacted]

HOW IT HAPPENED: he was leaning towards the platform to exit main court and possibly tripped on the yellow pad and fell

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 2:29
What time did they arrive?: 2:36

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

Aeden had previously warned [redacted] and his friends about calming down because we had a lot of people on main court.

[redacted] had [illegible] signing in the pool [illegible] paid for the jump [illegible]

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD: [illegible]

Employees present: Brandon

Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 3 / 07

Time: 3:30 pm

Name of Guest: [redacted]

Oct 22nd first jump

DOB: [redacted]

First Time Jumper (Circle one): YES or NO

Address:

Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]

Name of Adult accompanying child: [redacted] **Relationship:** Friend

Phone Number: (Home) [redacted] **(Cell)** [redacted]

friends phones Cindy Mom

HOW IT HAPPENED: 8-9 [illegible] dodgeball

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD: Tia

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 6 / 09

Time: 9:25 p.m.

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Landed on ankle wrong

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Lia
Employees present:
Waiver Attached (Circle one) (YES) or NO

Date of Injury: 11 / 06 / 09
Time: 10:10 p.m.

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO If Yes by whom?: [redacted]
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Customer knocked his mouth & possibly his teeth out w/his knee while jumping into the foam pit.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

Knocked out 2 Front teeth

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Lua
Employees present: Robin, Josh
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 9 / 09
Time: 2:20

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Did a double gainer landed on head.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:
'Wasn't fully aware of surroundings asked if he needed an ambulance, he denied, friends

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA)
MOD: Teresa
Employees present: Patrick Keating
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 11 / 10 / 09
Time: 7:30

5153 waiver #

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or (NO)
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: _____ **Relationship:** friend
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: was flipping on main court, landed on feet one foot on yellow pad and hurt ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: Dad **Tel:** [redacted]

COMMENTS: [redacted]

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD: Don Hill

Employees present: J[illegible]

Waiver Attached (Circle one): YES or NO

5 00pm check in

Date of Injury: 11 / 11 / 19

Time: 6:30 pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: 16[redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present?(circle one): YES OR NO Father came and picked up

Was Child dropped off? YES or NO **If Yes by whom?:** Father

Name of ~~Adult~~ Friend accompanying child: [redacted] **Relationship:** Friend

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Fell on dodge ball court. Said his arm snapped. Was holding arm and said it was really numb when he moved his arm. Looked broken. Father was right around the corner. Came and picked up and took to emergency room.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: [illegible]
Employees present: [illegible]
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 13 / 09
Time: 6:18pm

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** [illegible]
Phone Number: (Home) [redacted] **(Cell)** _____

HOW IT HAPPENED: Jumping on the pit trampoline, and was and bounce by fall to floor pit. Was told to call 911. Went to foam pit and kid was screaming. Leg was obviously badly broke. A lady was with him that said she was a nurse. Paramedics arrived shortly after.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 6:20
What time did they arrive?: 6:24

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Injury is logged
Child was taken by EMS hospital with paramedics and accompanying adult.

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA)
MOD: Teresa (Don)
Employees present: Dominic
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 11 / 18 / 09
Time: 4:40

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or (NO)
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: N/A **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court landed wrong broke leg. Complained alot about the pain. My Judy said stand up what happened. His friends were not on the court with him at the moment and I got very little information from them. DON

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 4:41
What time did they arrive?: 4:47

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:
[illegible] left closed cit half the court

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Lua
Employees present: V / [illegible]
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 28 / 09
Time: 5:15

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Twisted ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Teresa, L. S.
Employees present: Vedan
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 21 / 09
Time: 10:05

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: was jumping and she said it felt like her ankle popped out of place. Pain increased before paramedics arrived.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 10:06
What time did they arrive?: 10:12

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Friends were paramedics and had done something to "pop" her ankle back into place before I got to her. TD

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MGD: Xia
Employees present: Grey & Melyssa
Waiver Attached (Circle one): YES or NO

Date of Injury: 11/23/09
Time: 8:35

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Caught under the yellow pad; a popped his ankle

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 23 / 09
Time: 8:40 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: N/A **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Back flip off the wall & hurt ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Seemed okay... Court monitors helped him off the court

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA

MOD: Don

Employees present: Steven

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 5 / 11

Time: 3:[illegible]

Name of Guest: [redacted]

DOB: [redacted]

First Time Jumper (Circle one): YES or NO

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: [redacted] **Relationship:** Friends

Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: Jumping into foam pit. Young child and was in fell into foam pit & fell painfully. His friend called Tony's parents and I explained the situation and they told me they would meet him at Overlake hospital. I had the staff try to clear the crowd of onlookers, some were trying to take pictures and we told them not to

PARAMEDICS CALLED: YES or NO (circle one)

What time: 8:33

What time did they arrive?: 8:37

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Bottom of leg was rolling a half bone was poking into the skin, but did not break the skin. No blood.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Teresa
Employees present: Robin
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 7 / 09
Time: 7:10

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: jumped into foam pit and knee popped out of its joint.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 7:11
What time did they arrive?: 7:16

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

He pulled himself out of the foam pit and then while I was calling paramedics his friends carried him off the court and put him on a chair by the soda machines.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Sta
Employees present: Sterling/Steven
Waiver Attached (Circle one): YES or NO

Date of Injury: 12/12/09
Time: 8:37

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present? (circle one): YES OR NO
Was Child dropped off? YES or NO
If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Client was jumping fast across main court. Tried to dodge a little girl, his legs buckled & went under yellow pad.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 8:35
What time did they arrive?: 8:40

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

Bone went through the skin, The group he was with said ~~[illegible]~~ previously injured his leg. Spoke to mom & I stayed with client ~~[illegible]~~ the whole time.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA)
MOD: Teresa
Employees present: Bobby / Vedran
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 12 / 17 / 09
Time: 7:55 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? (YES) or NO **If Yes by whom?:** came with church group
Name of Adult accompanying child: [redacted] **Relationship:** church youth instructor
Phone Number: (Home) [redacted] **(Cell)** _____

HOW IT HAPPENED: was jumping on main court, did a flip and landed with both feet on the yellow pad. Complained of a lot of pain in ankle. Called paramedics and we moved him off to the platform.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 7:55pm
What time did they arrive?: 7:57pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

He was wearing high-top converse shoes, we kept them on until the paramedics came and they took it off to check his ankle.

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Teresa
Employees present: Ciara / Bobbie
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 12 / 19 / 09
Time: 8:45 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** friend
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumped off side wall trampoline and landed on the long black center tramp and said her knee hurt. We helped her off the court and we gave her ice. The pain wasn't going away so her friend took her to the hospital.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

I gave 3 passes out, one for [redacted] and the other 2 for Skylar and her little brother who had to leave with them.

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Don
Employees present: Greg
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 31 / 09
Time: 5.40pm

Name of Guest: [redacted]
DOB: _____ First Time Jumper (Circle one): (YES) or NO
Address: _____
Phone Number: (Home) _____ (Cell) _____

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: Mother
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: _____

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Lea
Employees present: JOE
Waiver Attached (Circle one): YES or NO

Date of Injury: Nov 01, 10
Time: 2:08 AM

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Tried doing a back Flip & landed on neck

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:
Seems to be okay

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Jon
Employees present: Jop
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 1 / 2 / 10
Time: 824

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO Friend If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Friend's
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main cell landed on his ankle wrong and broke it. Tony Dotson (accompanying friend) is a fire man and talked to 911 after I called them

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 8:24
What time did they arrive?: 8:28

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

Injured left trampoline and broken ankle called 911

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Lia
Employees present: Joe
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 4 / 10
Time: 11:30

Name of Guest: [redacted]
DOB: [redacted]
Address: [redacted]
First Time Jumper (Circle one): YES or NO
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping, landed on ankle & twisted it.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD: Lia

Employees present: Hindy

Waiver Attached (Circle one) YES or NO

Date of Injury: 1 / 8 / 2010

Time: 1:45

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: _____ Relationship: _____

Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: In grown toe nail, she was playing in dodgeball, someone stepped on her foot.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport School

Name of Person providing transport: _____ Tel: _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Reef
Employees present: Jaco
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 10 / 10
Time: 3:35

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] onship: girlfriend
Phone Number: (Home) (Cell)

HOW IT HAPPENED: was playing dodge ball, dove to catch a ball. Landed on his side on the yellow pad and had a lot of pain in his ribs. Gave him ice.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:

He was in good spirits. didn't want us to call paramedics.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Teresa
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 17 / 10
Time: 9:46pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Tried to do a backflip on private court and landed wrong. Possibly broke ankle. Called paramedics, came in through front door and were out in about 10 minutes.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 9:45pm
What time did they arrive?: 9:50pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC [SEA]
MOD: Teresa
Employees present: Alex L, Will, Aedan
Waiver Attached (Circle one) (YES) or NO

Date of Injury: 1 / 18 / 10
Time: 6:00pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** bday party mom
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: He was jumping across to exit the trampolines when another kid ran into him. He said the kid was trying to do a trick and messed up and fell and ran into his knee. We called his mom and she wanted the birthday party mom to take him home.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

He had a lot of pain in his knee when we went to help him off the court. Once we had him in a chair on the platform Kathy decided she was going to take him to the hospital instead. We called his mom back to let her know and she was going to meet them there.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Lia / Teresa
Employees present:
Waiver Attached (Circle one): YES or (NO)

waiver on file
checked 3/1

Date of Injury: 1 / 24 / 10
Time: 4:40pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumped off wall did a front flip, landed wrong and heard a pop in her leg. Has a lot of pain in her lower leg and ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Came with a group for PVT court so we called her mom and her dad was going to meet them at the hospital.

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SC SAC (SEA)
MOD: Don
Employees present: Patrick
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 5 / 2010
Time: 5:30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES OR) NO
Was Child dropped off? YES or NO [redacted] **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: [redacted] was jumping and doing flips on main court. He landed on his shoulder and dislocated it. We helped him off the court and into snack bar. We called his mother and the adult he came with took him to paramedic.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:
[redacted] had said that his shoulder was already messed up and that it had been making popping noises

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)

MOD: Lia

Employees present: Joe

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 5 / 2010

Time: 8:35

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? YES or NO [redacted] **If Yes by whom?:**

Name of Adult accompanying child: [redacted] **Relationship:** Mom

Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: was jumping noticed her foot was tingling, looked down & her toe was crooked.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 11 / 10
Time: 4:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumped from foam pit trampoline & felt knee pop out of place.

PARAMEDICS CALLED: YES or NO (circle one)
What time? 4:15
What time did they arrive?: 4:25

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SC SAC SEA

MOD: Greg Forster

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 12 / 2010

Time: 6:50 pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping [illegible] Felt "pop" right ankle

PARAMEDICS CALLED: YES or NO (circle one)

What time: 6:55 pm

What time did they arrive?: 7:02 pm

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

In serious pain - called ambulance to come
Broke ankle - walk
Applied ice to injured ankle

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Don
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 6 / 2010
Time: ~~PM~~ 7:00 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Aunt
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Another jumper jumped into Chandler's square and threw him off balance. He fell on the mats and was complaining of a hurt back. Lisa asked me to fill out a report of the incident.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Green

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 20 / 2010

Time: 6:50

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: 3[redacted]

Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: walking on private court, someone tripped over and fell, allegedly hurting her right ankle. Ice packs provided. no EMT's needed

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Ankle popped back in place.
Declined, but was given to seek medical attn
on ankle

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Greg F.

Employees present: Smith.

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 21 / 10

Time: 2pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address:

Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping and tried doing a backflip off the wall - fell awkwardly on left foot twisting left leg injuring knee area. ice provided

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

was able to stand after 10 min. but was helped out where [illegible]

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Greg F.

Employees present: [illegible]

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 23 / 10

Time: 8:45 am

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address:

Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Tried doing a backflip in net. Bounced on yellow pad landing awkwardly hurting foot/ankle

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

Gave crutches and ice pack. Journey to seek medical attn with friends

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SC SAC (SEA)
MOD: Ryan B
Employees present: Mason Butler
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 25 / 10
Time: 2:30pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

N/A

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: rolled ankle playing dodgeball

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: _____ **Tel:** _____

came with D. Pepper Pk.

COMMENTS:

gave him ice and crutches he said he is ok

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD:

Employees present: Ryan

Waiver Attached (Circle one): YES or NO

Waiver # 24735
Last Jump: NOV. 5 2009

Date of Injury: 2/25/10

Time: 9:00

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: _____

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan
Employees present: Greg
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 25 / 10
Time: 4:15 Pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Rolled ankle, came down at an awkward angle and rolled it over.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Dori / Ryan
Employees present: Vidran / Kyle
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 26 / 2010
Time: 8:04 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court, foot slipped under ~~pound~~ pad and [redacted] said that he heard his leg pop. He was holding his ankle when I got to him and said he needed medical help. Paramedics came and told Justin that he just had a bad sprain and Justin left with his father.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 8:04 pm
What time did they arrive?: 8:07 pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

[redacted] mentioned he had hurt his ankle before doing physical activities in the Army

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Greg

Employees present: Kate F.

Waiver Attached (Circle one): YES or NO

Date of Injury: [illegible]

Time: 7:40 pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** Came with friends

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on mini court came down awkwardly on right ankle and twisting it

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

During time - will seek medical attention after group leaves

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Ryan

Employees present: Greg, Dave

Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 4 / 10

Time: 1:30pm

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

Address: [redacted]

Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: _____ Relationship: _____

Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Foot got caught under black pads.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: Unknown Tel: _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Mike/Ryan
Employees present: Joe/Robby
Waiver Attached (Circle one): YES or NO

Date of Injury: 03 / 05 / 16
Time: 1040pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friends Dad
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Jumping landed on a trampoline & knee buckled

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend, Public Transport
Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

- Customer was in good spirits says his knee was buckled before (not a sky high) during another activity
- Did not want an ambulance, says he will walk off, just needs time
- Gave customer an ice pack & pass for next time

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Ryan
Employees present: Sean
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 7 / 10
Time: 3:20 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Parent or friend
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Hit back of head jumping into foam pit on yellow pad

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: [illegible]

Employees present: [illegible]

Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 8 / 10

Time: [illegible]

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO n/a

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: [illegible]

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

[illegible]

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Greg F
Employees present: Josh G
Waiver Attached (Circle one): YES or (NO)

Date of Injury: 3 / 10 / 10
Time: 6pm

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main court -- felt ankle pop jumping off wall then pop again landing. He was given - was able to move toes declined paramedics Attention

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Greg F
Employees present: Greg H
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 18 / 10
Time: 8:15

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping on main court, came down on ankle pad, left facility provided walking ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Seemed to be ok.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 13 / 10
Time: 12:15

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: [redacted] landed on his knees in middle of trampoline and fell back on his knees. Says his ankle hurts. States nothing wrong in his legs.

PARAMEDICS CALLED: YES or NO (circle one)
What time: —
What time did they arrive?: —

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan / Teresa
Employees present:
Waiver Attached (Circle one): YES or NO

K was taken in for an x-ray and resulted in a broken foot.

Date of Injury: 3 / 14 / 10
Time: 12:30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** mom
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: was jumping diagonally on main court, landed half on yellow pad and heard & felt a pop on the outside of his left ankle. was slightly swollen.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: mom **Tel:**

COMMENTS:

i talked to [redacted] and his mom about 15 min after the injury. he said it hurt a little but he couldn't walk on it. he was making it feel better. mom is going to take him to have it x rayed. wanted a copy of the report. per jerry we aren't allowed to give it out so i told her he would call her. she left reading unwrapping and said he could call her home number (/)

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD:
Employees present: Dan Hovasy, Joe Spay
Waiver Attached (Circle one): YES or NO

Date of Injury: 03 / 19 / 2010
Time: 22:22 PM

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): ~~YES OR NO~~
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping from Tramp to Tramp and his ankle gave way when landing a back flip

PARAMEDICS CALLED: YES or NO (circle one)
What time: 22:22
What time did they arrive?: 22:28

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: / /
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED:

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: [illegible]
Employees present: Jesse
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 24 / 10
Time: 8:13 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: hole gave out while jumping on main court

PARAMEDICS CALLED: YES or NO (circle one)
What time: 8:30 pm
What time did they arrive?: 7:30

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Been dislocated before

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Grey
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 17 / 16
Time:

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Landed sideways on knee and twisted

PARAMEDICS CALLED: YES (or NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Mtg
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 20 / 10
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on private court and ankle rolled out

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One); Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: [illegible]
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: [illegible]
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: was jumping [illegible] with her friends and was bounced on a larger gentleman and was jumped on leg seems to hurt

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan/Mike
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 03 / 27 / 10
Time: 7 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friends Mom
Phone Number: (Home) **(Cel** [redacted]

HOW IT HAPPENED: Collided w/ friend while jumping. injured knee

PARAMEDICS CALLED: YES or NO (circle one)
What time: N/A
What time did they arrive?: N/A

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:** [redacted]

COMMENTS:

*Doesn't hurt bad
*Have customer see pack
*Arrived @ 7pm
*Customer in good spirits

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 30 / 10
Time: 10:20 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
Address: 1[redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried a backflip in the trampoline and kneed him self in the nose

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:
- Feels like his nose is broken

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Gary F

Employees present: [illegible]

Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 3 / 2010

Time: 3:40 pm

Name of Guest: [redacted]

DOB: _____ **First Time Jumper (Circle one):** YES or NO

Address: _____

Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping and hit fence to hard - couldn't remember year, given the month

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

friend mom taking home

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan
Employees present: Alex C.
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 2 / 2010
Time: 7:15

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Rolled ankle while jumping on mainport, landed in middle of trump

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Greg

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 2 / 16

Time: 2:30

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address:

Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: A man was jumping and landed wrong. Rolled ankle. Ice was given

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: [illegible]
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 2 / 10
Time: 11:00 PM

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: was jumping on a trampoline, as she came down she landed on her ankle wrong.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA) Main Court
MOD: Mike / Vedran
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 04 / 07 / 16
Time: 7:30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? (YES) or NO **If Yes by whom?:** Dad
Name of Adult accompanying child: [redacted] **Relationship:** Friend's Mom
Phone Number: (Home) [redacted] **(Cell)** [redacted]

HOW IT HAPPENED: Jumping on Main Court. bounced off of a wall and landed on wrist. [redacted]

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Mom (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

Dad is taking son to Overlake

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Greg F
Employees present: [illegible]
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 8 / 2010
Time: 12:30 pm

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [illegible]
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: [illegible]
dislocated [illegible]

PARAMEDICS CALLED: **YES or NO (circle one)**
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [illegible] **Tel:** _____

COMMENTS:
[illegible]

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Mike / Ryan B.
Employees present: Jonelle M.
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 10 / 10
Time: 3:40

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted] 98020
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Jumping and landed on yellow pad
Hurt leg just below knee.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Ryan

Employees present: Greg

Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 10 / 10

Time: 9:40pm

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

Address: [redacted]

Phone Number: (Home)_____ (Cell)_____

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child:_____ Relationship:_____

Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: jumping landed awkwardly on right ankle, ice given

PARAMEDICS CALLED: YES or NO (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ Tel:_____

COMMENTS:

going to see physician

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC ~~SEA~~
MOD: (Free Hit)
Employees present: Brian J.
Waiver Attached (Circle one): ~~YES~~ or NO

Date of Injury: 4 / 11 / 10
Time: 8:30

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home)_____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child:_____ **Relationship:**_____
Phone Number: (Home)_____ **(Cell)**_____

HOW IT HAPPENED: Just jumping on private court and came down wrong and foot was twisted.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 8:45
What time did they arrive?: 8:50

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:**_____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: greg
Employees present: Fitz, Jesse
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 17 / 10
Time: 11:55pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: On main court another jumper landed before her and she rolled her ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan / Gragh.
Employees present: Joey H.
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 , 22 , 2010
Time: 6:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

~~If Minor Was an Adult Present ?(circle one): YES OR NO~~
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Twisted ankle while jumping. Stated she had to pop it back into place.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

Ankle seemed very swollen. Ice was given

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Grs. 6
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 24 / 10
Time: 11:15

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumped off main court wall trampoline — hit [illegible] on knee. [illegible] on court

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

ice provided [illegible] — cut may need stitches.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SC SAC SEA
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4, 25, 10
Time: 11:48

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship:
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Did a flip, fell and hurt his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD:
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 26 / 10
Time: 6:36

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Started playing dodge ball, bounced a couple of times to the side and into the yellow pad.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Feels pain in his ankle, and doesn't feel like he can put all his pressure on right foot.

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Great Geo
Employees present: Aedan
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 29 / 10
Time: 4:40pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) YES or NO
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping watching Sea and rolled ankle
Heard it pop.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport (driving)
Name of Person providing transport: Her Self Tel: _____

COMMENTS:
Helped off court, given ice, elevated leg, use crutches to car.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Ryan V
Employees present: Hanna Honeycutt
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 1 / 10
Time: 9:20

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) If Yes by whom?: _____
Name of Adult accompanying child: Brad Relationship: father
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: In dodge ball a bigger kid dodged ball and landed on Griffin hurting his knee

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel:_____

COMMENTS:
He has growth in ligements.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA
MOD: Ryan, Vedran
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 7 / 10
Time: 7:32

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) – (Cell) –

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: landed wrong private court

PARAMEDICS CALLED: YES or NO (circle one)
What time: 7:20
What time did they arrive?: 7:36

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:
Took well down to assist paramedics. She had only jumped a few steps
It was her b-day party tonight

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: [illegible]

Employees present: [illegible]

Waiver Attached (Circle one): YES or NO

Date of Injury: [illegible] / [illegible] / [illegible]

Time: 5:05

Name of Guest: [redacted]

DOB: [redacted]

First Time Jumper (Circle one): YES or NO

Address:

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: [illegible]

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

[illegible]

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Vedran
Employees present: Brian
Waiver Attached (Circle one): YES or (NO)

Date of Injury: 5 / 11 / 10
Time: 4:34

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Did a back flip in foam pit and hit his head on the pad. Has a small cut on his forehead

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC SEA

MOD: Gym

Employees present: [illegible]

Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 13 / 10

Time: 3pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO n/a

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping into foam pit when they started hurting

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

[illegible] ice and crutches -- [illegible] moved out of foam pit under adult power

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SC SAC (SEA)
MOD: Ryan, Greg F
Employees present: Cody
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 15 / 16
Time: 7:35

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO
If Yes by whom?: [redacted]
Name of Adult accompanying child: [redacted]
Relationship: Friend of family
Phone Number: (Home) [redacted] (Cell)

HOW IT HAPPENED: Jumping on main court, landed in middle of trump and his leg started hurting.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Tessaria started on previous injury. [redacted] carried [redacted] to truck and drove him to overlake hospital. Foster mother was meeting him there. RG
([redacted])

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Ryan B **COURT:** Foam Pit
Employees present: Aeder O'Neil
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 16 / 10
Time: 2:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: landed in foam pit and hit his ~~knee~~ nose on his knee.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Mother **Tel:**

COMMENTS:

Nose is bloody and swollen.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON

MOD: Ryan **COURT:** ~~[illegible]~~ Dexter Ball

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 20 / 10

Time: 9:17 pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO

Address: [redacted]

Phone Number: (Home)_____ **(Cell)**_____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**_____

Name of Adult accompanying child:_____ **Relationship:**_____

Phone Number: (Home)_____ **(Cell)**_____

HOW IT HAPPENED: Jumped off well and didn't make best landing.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:**_____

COMMENTS:

Got ice, Elevated leg. Denied crutches

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON

MOD: Vertigo **COURT:**

Employees present: [illegible]

Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 21 / 10

Time: 1:03

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Dodgeball → jumped over from one side to another and heard some pop in his knee

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Veteran COURT: main
Employees present: Chuck / Lauren / Suzy
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 18 / 10
Time: 4:50

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address:
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Mother
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Tried doing a flip and hit his knee to his chest. Bruised his knee.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:

Feels fine, he will ice it throughout the night.

Nov 9th 2009

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON
MOD: **COURT:** [illegible]
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 29 / 10
Time: 1:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) [redacted] **(Cell)** [redacted]

HOW IT HAPPENED: Bouncing across trampoline landed wrong

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 1:15
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Paramedics called but denied and father is picking up

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Vedian **COURT:** main
Employees present: Kristin, Anna
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 30 / 10
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Standing on main and sprained his ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

March [illegible]

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (CEA) CON
MOD: Ryan, Vedan COURT: Main
Employees present: Jay
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 4 / 10
Time: 9 ?s

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) ←

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumped from front to the middle section
Jumped in front of Tyler and Tyler tried to stop. more than
put pressure on his ankle

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

[redacted] says he has been playing soccer for a while that
weakened his ankle, he said he injured it before.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Ryan, George. COURT: PNT
Employees present: Joy
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 5 / 10
Time: 3:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

~~If Minor Was an Adult Present ?(circle one): YES OR NO~~
~~Was Child dropped off? YES or NO~~ ~~If Yes by whom?:~~
~~Name of Adult accompanying child:~~ ~~Relationship:~~
~~Phone Number: (Home)~~ ~~(Cell)~~

HOW IT HAPPENED: Landed on his back and hit a dolly with no supports.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Self Relative Friend Public Transport
Name of Person providing transport: _____ Tel:_____

COMMENTS:

- Tail bit hurts.
- Will waive medical fees courtesy of US Army

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Veteran, Ryan COURT: Main
Employees present: Joey
Waiver Attached (Circle one) YES or NO

Date of Injury: 6 / 5 / 10
Time: 7:03

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child:_____ Relationship:_____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Tried a front flip, landed wrong and hurt his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Broke his ankle last year

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON

MOD: Greg, Vekon COURT: foam

Employees present:

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 6 / 10

Time: 12:15

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): (YES) or NO

Address: [redacted]

Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? YES or (NO) If Yes by whom?: _____

Name of Adult accompanying child: [redacted] Relationship: mother

Phone Number: (Home)_____ (Cell) [redacted]

HOW IT HAPPENED: Tried a front flip on foam and hit his knee on the nose. Has a small cut on top of his nose

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): (Relative) Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SBA CON
MOD: Gray **COURT:** Main
Employees present: Chris [illegible]
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 6 / 10
Time: 3:40 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Landed awkwardly [illegible]

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

ice given

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SBA CON
MOD: Grg 6 **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 9 / 2010
Time: 4pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** ~~[illegible]~~ friend's mother
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on main court — fell pain in upper left ribs under left shoulder making it difficult to breathe

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: mother **Tel:** _____

COMMENTS:

mentioned that earlier in the week she may have injured herself because she was just jumping up and down on main court.
/mother called said she had heart surgery a couple years ago

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON

MOD: Ryan **COURT:** Main

Employees present: Kristen Krause

Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 9 / 10

Time: 8:50pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: [redacted] **Relationship:** Mother

Phone Number: (Home) [redacted] **(Cell)** _____

HOW IT HAPPENED: Standing on the yellow pad, about to jump and someone hit his head from behind.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

Given ice, water. Says he is feeling better. No previous injuries. but is not jumping remainder of time. (the left)

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON

MOD: Ryan **COURT:** Dodgeball

Employees present: Brian I.

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 10 / 10

Time: 9:20 pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO

Address: [redacted]

Phone Number: (Home) [redacted] 157 **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? YES or (NO) **If Yes by whom?:**

Name of Adult accompanying child: [redacted] **Relationship:** Math teacher

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping back and tried to avoid another jumper and landed off balance.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

Previous ankle injury unsure left or right.
gave him ice bag. will use crutches to get to car.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: [illegible] **COURT:** [illegible]
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 13 / 10
Time: 6:45

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumped off wall and fell and twisted ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON

MOD: Vedran COURT: Main

Employees present: Ashley, Justin

Waiver Attached (Circle one): YES or ~~NO~~ on file

Date of Injury: 6 / 14 / 10

Time: 7:40

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

Address: [redacted]

Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: _____ Relationship: _____

Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Tried doing a front flip 360 and landed wrong on his ankle

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted]

COMMENTS:

March 7th 2010

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON

MOD: Gym **COURT:** Dodge Ball

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 16 / 10

Time: 1:55

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping backwards on trampoline landed awkwardly, dislocated right knee, immediately called, customer carried out to little room.

PARAMEDICS CALLED: YES or NO (circle one)

What time: 1:59

What time did they arrive?: 2:02

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran **COURT:**
Employees present: Jay
Waiver Attached (Circle one): (YES) or ~~(NO)~~ on file

Date of Injury: 6 / 20 / 10
Time: 8:00 PM - 9:00 PM

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried a double front flip and he knocked two of his teeth against his knee

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Ryan **COURT:** Private
Employees present: Justin G.
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 23 / 10
Time: 9:20

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Ran up wall trampoline and came down landing on it wrong.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Stated he was light headed; Previous injury on same ankle due to jet skiing

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Greg **COURT:** Mark
Employees present: Daniel
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 26 / 12
Time: 5:30 pm.

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumped off wall and landed on left leg. "It popped out then came back in" pain scale (8 out of 10)

PARAMEDICS CALLED: YES or NO (circle one)
What time: 5:33 pm
What time did they arrive?: 5:00

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Gray H COURT:
Employees present: Julian Haiel
Waiver Attached (Circle one): YES or NO

Date of injury: 6 / 3 / 10
Time: 4:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was customer wearing: Athletic clothing
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Aunt
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: foam pits wall into foam and knocked her knee into her face, causing a deep cut in the lip.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

May be going to hospital for stitches to the lip

Sept 3rd 2009

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: **COURT:**
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: July / 2 / 2010
Time: 5:30

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was customer wearing: Blue / Black / RF
Address: [redacted]
Phone Number: (Home) ✓ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: "First Jump ... Boom"
rolled ~~on~~ foot wrong way.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel** [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran, Greg **COURT:** main (back)
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 5 / 10
Time: 5:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was customer wearing: Short brown hair, black shirt, black/gray board shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried jumping off the side wall, and hit the trampoline and possibly hit a hole which made his heel go through the trampoline.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 5:10
What time did they arrive?: 5:15

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- Paramedics indicated that it was a compound fracture.
- [redacted] was out of his leg and his fibia was broken.
- He said that this was his 1st time and wasn't trying anything out of his skill level.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg H **COURT:** [illegible]
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 5 / 10
Time: 4:00 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was customer wearing: Athletic Clothing
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: landed backwards on yellow pad

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Waiver attached. Family bringing him home

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Grey **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 6 / 10
Time: 1:30 pm

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
What was customer wearing: Black shirt, white shorts, black hat
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main court and ankle rolled over.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Happens all the time.
- Ankle tends to roll over
- Little pain
- In good spirits

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SBA CON
MOD: Greg **COURT:** Dodgeball
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 7 / 10
Time: 8:00 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was customer wearing: Black T-top, Black Shorts
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Jumping ~~on to off well~~ on dodgeball, landed wrong while another jumper was jumping on same trampoline.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 8:01
What time did they arrive?: 8:05

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Plays sports (basketball, football). fourth time at facility.

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Grey COURT: Main
Employee present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 10 / 10
Time: 1:30 pm

Name of Guest: [redacted]
DOB: First Time Jumper (Circle one): YES or NO
What was customer wearing: white t-shirt grey shorts
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: / Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on dodgeball. Rolled Ankle and heard a "Pop".

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:
Helped out on Crutches. In good Spirits

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON

MOD: [redacted] COURT: Foam Pit

Employees present: Bryan

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 , 10 , 10

Time: 8:40

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): (YES) or NO

What was customer wearing: Black dress, grey/blk shirt

Address: [redacted]

Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: Relationship:

Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumped off the wall and landed on to the yellow pad. Fell short before the foam pit.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- She feels like she bruised her shin, but feels fine. Put ice on the leg and made it level.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan COURT: foam pit
Employees present: John
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 15 / 10
Time: 6:05 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was customer wearing: Shorts, T-shirt
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES ~~or NO~~ If Yes by whom?: _____
Name of ~~Adult~~ accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Facing backward attempting backflip hit head on yellow mat. Back of head.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran **COURT:** foam pit
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 19 / 2010
Time: 5:13

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was customer wearing: Gray shirt / shorts, short black hair
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried a front flip on foam pit and hit his knee in the mouth. One of his teeth is half was knocked out.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 22 / 10
Time: 2:50

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was customer wearing: Black shirt, shorts
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jump on back of main court, landed on his younger brother and twisted his ankle. Immediately move off court to the back stairs. No Monitors were notified.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

mother stated -
not taking him to the hospital. They were just going home to put his leg up.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg H **COURT:** Main
Employees present: Cody
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 24 / 10
Time: 2:25 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Blue T-shirt, Blue Jeans, No shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Father
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Attempted flip off of wall on main court. When landing put all of his weight on left foot. Felt pop.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:
Was given 2 jump passes. Jumper as well as Parents in good spirits

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Green 11 COURT: Main
Employees present: —
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 28 / 10
Time: 9:15

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Black Shorts & Red Shirt
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping of wall. Dragged finger across pad, and dislocated it, popped back in.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

Dec 22 2009

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan B. **COURT:** Foam
Employees present: Alyssa Sheaulin
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 / 28 / 10
Time: 11:30 am

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Grey Tshirt, Tan Cargo shorts
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Brother
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Trying to do flip, landed on trampoline and leg gave way, momentum carried him into foam pit.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 11:30 am
What time did they arrive?: 11:35 pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Te** [redacted]

COMMENTS:

Friends stated he landed in center of trampoline and leg gave way

Brother not providing transport.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan B **COURT:** Main/front
Employees present: Monisha & Kristin K
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7, 29, 10
Time: 9:30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was customer wearing: Light blue tank top & gray shorts
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Landed wrong on Right ankle

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: —
What time did they arrive?: —

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Trans[redacted]
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Friends carried her off Tramps & to car

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Jungle **COURT:** Main
Employees present: Cody
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 4 / 10
Time: 9:20 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: White Shirt, Red Shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: came down wrong and ankle rolled over.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Aug 4th 2010 or July 22nd 2010 665244

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan COURT: Main
Employees present: Steven Gilbert
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 8 / 5 / 2010
Time: 6:50

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: green shirt Tan shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumped over the yellow pad (landed close to the pad)

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 7:00
What time did they arrive?: 7:05

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

Very calm. feels fine. tingaling in the foot. Ankle joint appears out of place.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON

MOD: **COURT:** Main

Employees present: David Morgan

Waiver Attached (Circle one) YES or NO

Date of Injury: 8 / 8 / 10

Time: 1:28

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)

What was the customer wearing: Short black hair, black shirt, wearing blue shorts

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumped across the trampoline and landed wrong on his right knee. Feels like his knee popped.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran, Gregh **COURT:** foam
Employees present: Morgan
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 10 / 10
Time: 5:18

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Brown ~~semi~~ long hair, white shirt, green shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:** Mom
Name of Adult accompanying child: [redacted] **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: Attempted a double back, and didn't go far enough. He hit his knee under his eye. There is a open cut ~~[illegible]~~ under his eyebrow.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

April 16th 2010

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Ryan, Vulcan **COURT:** Foam
Employees present: James
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 12 / 10
Time: 4:25

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white Shorts, Gray Shirt
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: No adult **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Did double backflip into foam pit and hit hard on right side with head and shoulder

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): ? Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Talked to him for over 20 minutes. Felt dizzy at first but was doing much better once he left. Had slight swelling on his head (goose egg) and could not lift left shoulder.

Ryan

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Ryan **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 13 / 10
Time: 9:30

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Gray Shirt, Plaid Shorts
Address: [redacted]
Phone Number: (Home) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** Friend of family
Phone Number: (Home) [redacted] **(Cell)** _____

HOW IT HAPPENED: Jumping on main court and rolled ankle on yellow pad

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **#:** [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Pizza **COURT:** Pit
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 14 / 10
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing:
Address:
Phone Number: (Home) / **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on pit court. Injured knee. Jumping high came down.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Declined services from Emt. Relative listed above took him to Overlake. ~~Possibly~~ Hurt that same knee (Rt) in the past. Had a knee brace on.

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Chris **COURT:** Main

Employees present: —

Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 11 / 10

Time: 7:15

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: blue shirt, white shorts

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main trampoline rolled over.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

July 7th 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Grey **COURT:** Party Area
Employees present: Greg H
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 14 / 10
Time: 4:07

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Green Shirt, Black Short
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** Friend (Parent of party)
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: Walking in party area. Slipped on wet floor.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

"wet floor" signs present during incident. Greg H has photo evidence of the floor after the accident. Picture of the area attached.

March 11th 2010

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON

MOD: Ryan, Vedran COURT: Dodgeball

Employees present: Klye Lance

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 8 / 19 / 10

Time: 3:35

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or (NO)

What was the customer wearing: Brown Shirt

Address: [redacted]

Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or (NO) If Yes by whom?:

Name of Adult accompanying child: [redacted] Relationship: Nanny

Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: [redacted] states he was double bounced by larger child and hurt his leg

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Spoke w/ the nanny and she said he was tendency to ~~[illegible]~~ exaggarate.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 20 / 10
Time: 2:25

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Shoes. Sweats / T-shirts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumped off the side wall and tried jumping to the next tramp. over but rolled his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC [redacted] CON

MOD: Vedran, Ryan COURT: main

Employees present: Cody S.

Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 26 / 10

Time: 7:00

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: red t-shirt, navy blue shorts, curly brown hair

Address: [redacted]

Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: parents

Name of Adult accompanying child: [redacted] Relationship: dad

Phone Number: (Home) [redacted] (Cell)

HOW IT HAPPENED: Jumped around and tripped over the yellow pad and landed on his head. His ~~head~~ chin hit his chest. He felt he was out of breath.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: dad Tel: above.

COMMENTS:

Nov. 3rd 2009

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: freeg COURT: focus
Employees present: Marlah
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 24 / 10
Time: 17:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: blue Shorts & White Shirt
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mom
Phone Number: (Home) (Cell)

HOW IT HAPPENED: jumping in foam pit, knee came in contact with forehead. Bump on forehead

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg **COURT:** Foam
Employees present: Stevina, Kayla
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 25 / 2010
Time: 11:20 AM

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: RED SHIRT, Black pants, no SHOES
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** ~~mother~~
Name of Adult accompanying child: Sonya **Relationship:** Father
Phone Number: (Home) _____ **(Cell)** SEE BELOW

HOW IT HAPPENED: Jumping into foam pit - Doing a Flip
Hurt neck - Ice given, WATER Given

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Mother on location - ~~[illegible]~~ calm and cooperative whole time - letting Austin rest

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Ryan, Greg F. **COURT:** Main
Employees present: Stolna
Waiver Attached (Circle one) YES or NO

Date of Injury: 8 / 25 / 10
Time: 12 22 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Grey BBALL SHORTS, Dark Black t-Shirt
Address: [redacted]
Phone Number: (Home) ____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** ____
Name of Adult accompanying child: ____ **Relationship:** ____
Phone Number: (Home) ____ **(Cell)** ____

HOW IT HAPPENED: R foot (ankle) got caught under yellow pad
Sac'd foot was sweaty and slipped

PARAMEDICS CALLED: YES or NO (circle one)
What time: ____
What time did they arrive?: ____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** ____

COMMENTS:

In good spirits, first time injury, 2 bags of ice given

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Brian Grehl **COURT:** main

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 12 / 25 / 10

Time: 4:40

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: blue long tee, shorts, sandals

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Hopped around from one trampoline to the other, and accidently hit the yellow pad. Felt her ~~[illegible]~~ ankle roll

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel** [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran COURT: main
Employees present: Cody S
Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 26 / 10
Time: 9:20

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: red shirt, white shorts
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Rolled his ankle while jumping.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Previous ankle injuries.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON

MOD: Greg **COURT:** Foam

Employees present: Kylin

Waiver Attached (Circle one): YES or NO

Date of Injury: 8 / 27 / 10 Entered Feb 7th

Time: 8:10 pm

Name of Guest: [redacted]

DOB: _____ **First Time Jumper (Circle one):** YES or (NO)

What was the customer wearing: Blue Gym Shorts, Black Shirt, blonde hair

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR (NO)

Was Child dropped off? (YES) or NO **If Yes by whom?:** came w/ friends

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried doing a double front flip into foam, knee w/ left eye – feeling dizzy & sick, nose started bleeding (not in foam pit)

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- friends taking him home, ice given, knew THE DATE, HIS NAME
- ↓ or overlake

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: [illegible] **COURT:** main
Employees present: [illegible]
Waiver Attached (Circle one): YES or NO

X **Date of Injury:** 8 / 31 / 10
X **Time:** 3:05 PM

X **Name of Guest:** [redacted]
X **DOB:** [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing:
X **Address:** [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) **(Cell)** [redacted]

X **HOW IT HAPPENED:** Jumping on on main Court Jumped off hall and landing on ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
X **Name of Person providing transport:** [redacted] **Tel:** [redacted]

COMMENTS:

Waiver entered Aug. 31st 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Han, Vadian COURT: Kids
Employees present: Krishnti
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 4 / 10
Time: 6:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: gray short sweat pants
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: parents
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) _____ (Cell) above

HOW IT HAPPENED: Bounced around but her leg got stuck under the yellow pad and twisted her ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above.

COMMENTS:

Sept 4th 2010

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Frank/Ryan COURT: Main
Employees present: Kelly & Brandon
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 4 / 10
Time: 1:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Jeans Blue Shirt
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main court rolled ankle. Ice given. Customer in good spirits.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Vedran COURT: Foam

Employees present: Joseph

Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 4 / 10

Time: 10:20

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: red sleeveless shirt, black shorts

Address: [redacted]

Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: _____ Relationship: _____

Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Tried doing a double and hit his knee on his nose.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: _____

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedcan COURT: foam
Employees present: Marleigh
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 6 / 10
Time: 4:46

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: blue shirt, black shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: parents
Name of Adult accompanying child: [redacted] Relationship: _____
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Tried diving head on in the foam and heard her back crack. Lower pain.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above.

COMMENTS:

Sept 7th, 2009

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran **COURT:** foam
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 9 / 6 / 10
Time: 6:05

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Black & BLUE Shorts White Shirt
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Doing a flip into the foam landed wrongly & dislocated his left hip

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 6:15
What time did they arrive?: 5:30

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Vedran COURT: main
Employees present: Chase, Rachel
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 11 / 10
Time: 5:10
Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: black shirt + black sweat pants
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: Cousin
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Bounced around and felt his ankle roll. A little bit swollen

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Greg F **COURT:** Main

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 13 / 10

Time: 225p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: ~~gray~~ orange top, black pants

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on main felt left knee ligament "snap"

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

wasn't in pain, but feels very tender

ice given

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran COURT: Main
Employees present: Monica W. and John
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 16 / 10
Time: 6:50

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one) YES or NO
What was the customer wearing: black t-shirt, white shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: friend
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Landed wrong and fell on his ankle. Ankle was a bit swollen.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: above Tel: _____

COMMENTS:
- Hurt his ankle previously (not at SkyHigh)

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran COURT: Main
Employees present: Monica / David
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 16 / 10
Time: 3:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Blackshorts gray shirt
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: landed on the yellow mat & twisted his ankle causing fracture

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend / Public Transport [redacted]
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:
- rolled his ankle best before
- will go to the hospital today

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran COURT: foam
Employees present: Alissa
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 17 / 10
Time: 4:10-15

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: white shirt, white shorts, long hair
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: [redacted]
Name of Adult accompanying child: friends' mom Relationship: _____
Phone Number: (Home) _____ (Cell) N/A

HOW IT HAPPENED: Tried doing a double front flip and his knee hit his mouth. Small cut in his mouth.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: doesn't know

COMMENTS:
- Washed out his mouth, might be going to the hospital.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: COURT: MAIN
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 18 / 2010
Time: 10:09

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: father
Phone Number: (Home) (Cell) above.

HOW IT HAPPENED: Tried doing a flip on the side tramp. and his foot landed wrong. His foot was under the yellow pad. He feels like he twisted his foot.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Father Tel: above.

COMMENTS:
- Going to the hospital

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Greg F. **COURT:**
Employees present: Sterling
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 18 / 10
Time: 3:30p

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Brown Shirt, camo Shorts
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** Friend's parent
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on main court, ~~was double boom~~ two kids on same trampolines, twisted left ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

can't move toes initially, can't after a few minutes, ice given
Parents will be called

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran COURT: main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 8 / 10
Time: 7:00

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: white shirt, black shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumped around and landed on side of his leg. Felt something pop under his knee. He thinks that it's a ACL fracture.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

Aug 21st 2010

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran **COURT:** Ream
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 19 / 10
Time: 6:15

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
What was the customer wearing: gray shirt, jeans
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one) (YES) OR NO
Was Child dropped off? YES or NO [redacted] **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** father
Phone Number: (Home) _____ **(Cell)** above

HOW IT HAPPENED: 10+ under lane: [redacted] was jumping back and he believes he was knocked from the other jumpers in the next lane and he ran into the yellow wooden pole. Has a swollen forehead. He hit the bottom of the pole, most likely trimmed over the yellow pad on the way back.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Self (Relative) Friend Public Transport
Name of Person providing transport: above **Tel:** _____

COMMENTS:

- wants to see a doctor.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Freeplay **COURT:** Dodgeball
Employees present: James
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 21 / 10
Time: 1:45pm

Name of Guest: [redacted]
DOB:
First Time Jumper (Circle one): YES or NO
What was the customer wearing: Jeans blue sweater
Address:
Phone Number: (Home) **(Cell)**

~~**If Minor Was an Adult Present ?(circle one): YES OR NO**~~
~~**Was Child dropped off? YES or NO**~~ ~~**If Yes by whom?:**~~
~~**Name of Adult accompanying child:**~~ ~~**Relationship:**~~
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: playing dodgeball rolled over ankle (left)

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Ice was given.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC ~~SEA~~ CON
MOD: Vedran **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 23 / 10
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white shirt, black/red shorts
Address:
Phone Number: (Home) **(Cell)** N/A

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)** N/A

HOW IT HAPPENED: Jumping on the trampoline and felt his shin pop.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Michael Smith **Tel:**

COMMENTS:
- going to the hospital
- left in a hurry w/ his friends

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Greg F **COURT:** Pit

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 24 / 10

Time: 7:10 p

Name of Guest: [redacted]

DOB: _____ **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: white shirt and jeans

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: felt knee "pop" & turned inward while jumping

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

ice given

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Crystal Rush COURT: PUT
Employees present: Chase
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 25 / 10
Time: 4:10

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: [redacted]
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: First jump ankle (left) gave out.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Vedran COURT: main
Employees present: Micheal /
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 25 / 10
Time: 7:10

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: open toe shoe, jeans
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: friend
Phone Number: (Home) (Cell) N/A

HOW IT HAPPENED: Jumped off the side tramp. landed wrong on his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: N/A

COMMENTS:
- no swelling
- pain decreased-

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Gym A **COURT:** Kids
Employees present:
Waiver Attached (Circle one): YES or NO

Sept 26 2010
~~Feb~~
~~Dec 31~~

Date of Injury: 9 / 26 / 10
Time: 1 PM

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black Pants purple Shirt
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping in kids court, called Ankle. Left. Jumping from trampoline to trampoline.

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg H **COURT:** Dodgeball
Employees present: Kelly H
Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 26 / 10
Time: 12:05

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: [illegible]
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO [redacted] **If Yes by whom?:** Father
Name of Adult accompanying child: [redacted] **Relationship:** Father
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on dodgeball. Fell backwards on a footflip and landed on back

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel** [redacted]

COMMENTS:

Father was very nice and understanding. Ice was given.

July 20th 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Bryan **COURT:** dodgeball

Employees present: John

Waiver Attached (Circle one): YES or NO

Date of Injury: 9 / 29 / 10

Time: 9:00

Name of Guest: [redacted]

DOB: _____ **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: Black Shirt, Socks

Address: _____

Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: ~~Foot~~ Rolled ankle (Left)

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON
MOD: Greg F. **COURT:** MAIN
Employees present: Jay V., Jordan K., Ashley H.
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 10 / 1 / 2010
Time: 10:01 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Grey SHIRT, BLUE SHIRT
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping from one trampoline to another, landed on front of fellow and causing ~~left~~ right ankle to Buckle

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 10:08 p
What time did they arrive?: 10:04 p

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

paramedics called. Severe ankle injury.
Happened on Back of main court.
ice given

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg F **COURT:** main
Employees present: Sterling
Waiver Attached (Circle one): YES or NO

Date of injury: 10 / 2 / 2010
Time: 6:20

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Bright Blue shirt jeans
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend DAD
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping on main court, landed in awkward position rolling right Ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

ice given

waiver entered June 25, 2010

INJURY REPORT

Location (circle one): SJC SAG SEA CON
MOD: Cindy H COURT: Main
Employees present: Ashley
Waiver Attached (Circle one): YES ~~or NO~~

Date of Injury: 10 , 2 , 10
Time: 4:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Grey pants tan shirt
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(Circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) [redacted] (Cell) [redacted]

HOW IT HAPPENED: Jumping on main. Jumped off the wall fell and rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:
Ice given. Mother present.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Grey H COURT: Main
Employees present: Jay V
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 2 / 10
Time: 4:19

Name of Guest: [redacted]
DOB: First Time Jumper (Circle one): YES or NO
What was the customer wearing: Yellow Shirt, Black Shorts
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: On Main Court, Stepped onto a trampoline, Customer jumped on same tramp and double bounced him.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

July 26th 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Greg F **COURT:** Main

Employees present: Sterling

Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 8 / 10

Time: 10:55 p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: RED SHORTS, BLACK TANK

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** friend relative

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping from top of wall on main hurt left knee landing awkwardly

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

Ice given, water given

waiver entered october 1, 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: ~~[illegible]~~ Cough **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 6 / 10
Time: 3:30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Jeans brown Shirt
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court. Another customer ran into him landing on his left foot.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Ice given. Hurt ankle (L) about a week ago.

Sept 12th 2010

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON

MOD: [redacted] Greg Hulse **COURT:** PVT

Employees present?

Waiver Attached (Circle one): YES or (NO)

Date of injury: 10 / 6 / 10

Time: 2:55

Name of Guest: [redacted]

DOB: _____ **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: Athletic clothing

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Rolled Left Ankle on trampoline. PVT

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport

Name of Person providing transport [redacted] **Tel** [redacted]

COMMENTS:

Ice given.

July 13th 2010

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran **COURT:** foam
Employees present: Michael
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 7 / 10
Time: 8:45

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: black shirt, shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: N/A **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried doing a triple-back flip and felt like he hit the bottom of the foam. Had a small cut on top of his head, bleeding.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** same

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Night **COURT:** Private
Employees present: Brandon
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 8 / 10
Time: 4:50

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Jeans, white t shirt
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on Pit. Rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Ice given.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan **COURT:** Main
Employees present: Will
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 8 / 10
Time: 2:29

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: White Shirt, black pants
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: — **Relationship:** —
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Stepped on trampoline and ankle rolled.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 10 / 10
Time: 6:14

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: blue shirt / blue shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: U/A **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Did a back flip off the wall and went too far where he hit the yellow pad and felt his ankle pop.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- Ankle is swollen, can't move it
-

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Gma **COURT:** Private
Employees present: Alan
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 10 / 10
Time: 1:29

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black ~~Pants~~ Pants, Black Shirts
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping and landed wrong. left ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Ice given.

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Fanny **COURT:** ~~[illegible]~~ Foam
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 10 / 10
Time: 4:22

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Shorts with white shirt
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** mother
Phone Number: (Home) **(Cell)** above

HOW IT HAPPENED: Double front flipped in foam pit and his knee indented his teeth.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Little bleeding
- Was dropped off, mom was coming to get him
- She's taking him to the hospital
- Tooth was not knocked out

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Rey H **COURT:** Foam
Employees present: Kaylin
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 11 / 10
Time: 7:10pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Sem Shorts brown top
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: BackFlip into foam pit. ~~Hurt~~ Hit head on the pad while jumping in. Back, head, chipped teeth.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Ice given. Previous back injury.

May 28th 2010

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg G. **COURT:** Main
Employees present: Sterling
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 15 / 10
Time: 9:58 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black Shirt, Tan Cargo Shorts
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Doing flips on main finished awkwardly landing on red pad — heard a pop in ankle (R)

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

ice given — said he was fine
walked off under own power.

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greyf **COURT:** Mean
Employees present: Jordan K
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 15 / 10
Time: 630p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Gray Shorts, black tank
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumped off tramp wall, landed awkwarding, rolling ankle (L)

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

Ice + ½ jump pass given

2/9/11
→ Followup: spoke w/ father Eric, looking to have ER bill covered in amount of $600. ~~Not~~ told him signing waiver releases Sky High from liability if injury occurs

2/9/11 – See attached email from parent gj

Sept 27 09

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Veteran COURT: ~~MA~~ DB
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 16 / 10
Time: 11:50

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: white t-shirt, purple shorts
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) (Cell) above

HOW IT HAPPENED: Run towards the balls and slipped on the yellow pads, and felt her ankle roll on one side.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: Jodi Tel: above

COMMENTS:

- swollen / can't move her ankle

Oct 8 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedian COURT: main
Employees present:
Waiver Attached (Circle one) YES or NO

Date of Injury: 10 / 16 / 10
Time: 1020

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: black shirt / black shorts
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Bounced on one trampoline and fell on his knees except one of his knees twisted. Hurts really bad, no swelling.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above (mom)

COMMENTS:
- bad knee problems

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Greg H **COURT:**

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 17 / 10

Time: 3:25

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: White Shirt, Blue Shorts

Address:

Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Fell back on main court. knee hit him in the nose

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg F. **COURT:** pvt
Employees present: Jan V. Cody S.
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 22 / 10
Time: 9:05 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black Shorts, white shirt
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]
emergency

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on pvt ct – felt knee twist
(R)

PARAMEDICS CALLED: YES or NO (circle one)
What time: 9:06
What time did they arrive?: 9:11 p

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

previous injury on same knee

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran **COURT:** DB
Employees present: Ciara
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 22 / 10
Time: 9:20

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: blue shirt, shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping around on private court and collided w/ another person rolling his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): him self Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- feels fine
- moves his foot w/little pain
- refused med. assistance.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedian **COURT:** 6am
Employees present: Monica
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 10 / 23 / 10
Time: 10:37

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: white shirt, jeans
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO X **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Attempted a double front flip but didn't spin fast enough, and popped his shoulder out.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: Dylan **Tel:** X

COMMENTS:

- Happened before
- His friend tried to pop it back in
- Refused ambulance
- previous bike accident

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg F **COURT:** main
Employees present: Morgan
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 26 / 10
Time: 3:23 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: DARK NAVY SHORTS / DARK TANK
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumped off wall, tried to avoid landing on yellow pad, so "straddle"-landed on two different trampolines rolling right ankle when landing. Heard it "pop"

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Tra[redacted]
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:
crutches, ice given

INJURY REPORT

Location (circle one): SJC SAC SBA CON
MOD: Veltian, Rufus COURT: main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 29 / 10
Time: 7:00

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: [redacted]
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Jumping on main court, and landed on his legs and stretched out his back. Felt some pain in his lower back

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:

- Shortly went back to jumping.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 29 / 10
Time: 9:25

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Blue Jeans / Grey shirt / Grey shoes
Address: [redacted]
Phone Number: (Home) — **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: 1st time jumper - just landed wrong way & rolled ankle → no one bumped him → just bad landing → wants to come back & is sad he made a bad landing

PARAMEDICS CALLED: YES or NO (circle one)
What time: 9:15
What time did they arrive?: 9pm

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

we provided him a few free jump passes → he says he'll definitely be back.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Gregg **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10, 30, 10
Time: 7:10

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Seahawks Jersey, shorts
Address: _____
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main court. landed wrong on left ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: N/A **COURT:** Main

Employees present: Mon. on N

Waiver Attached (Circle one): YES or NO

Date of Injury: 10, 30, 10

Time: 10:18

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: Red Shirt Grey Sweats

Address:

Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main Court. Landed wrong on right foot/ankle. Felt a pop. Helped off the trampoline.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

Ice given. Swelling. Able to move toes.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran, Ryan **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 20 / 10
Time: ~~[illegible]~~ 1:05

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
What was the customer wearing: black long shirt, jeans
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on MC and landed on the yellow pad rolling his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative ~~Friend~~ Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- Pain was not severe
- ~~[illegible]~~ Feels better, put ice on his ankle
- no swelling

Mirovia

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran, Ihan **COURT:** main
Employees present: Sean, Winter
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 30 / 10
Time: 7:00

Name of Guest: [redacted]
DOB: [redacted] / **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: red shirt, shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** father of a bday girl
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Was on main court and a little girl stepped infront of her as she was jumping. she tried to avoid her and rolled her ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- swollen a lil
- Pain stayed the same
- gave ice,

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: COURT:
Employee present: Mon. m
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 , 20 , 10
Time: 9:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: pink dress white tights
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: [redacted]
Phone Number: (Home) (Cell) same as above

HOW IT HAPPENED: She was jumping - landed incorrectly → no one was around her & no one bounced into her. She fell → said she landed straight legged & heard a pop in her knee. It was on an enclosure trampoline, mother pulled her off before coach monitor could arrive → was given ice until paramedics arrived

PARAMEDICS CALLED: YES or NO (circle one)
What time: 10pm
What time did they arrive?: 10:04

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

2 Jump passes were given → mother was very curteous & does not appear upset. Mom requested paramedics to be called.

- mother has decided to take her daughter to Valley Hospital on her own.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Crewlt COURT: Main
Employees present: Sterling
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 7 / 10
Time: 9:20

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Green shirt blue pants
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumping on main court. Lost her balance and fell face first on the yellow pad.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel:_____

COMMENTS:
Ice given.
Nose bleeding.

Nov 6th 2010 or Nov 7th 1198100

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Kwight COURT: foam
Employees present:
Waiver Attached (Circle one): YES or NO 1197265

Date of Injury: 11 / 7 / 10
Time: 2:10

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Kevin Relationship: Father
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on foam pit. knee made contact with forehead. Bleeding.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Ice given.
Stitches possibly needed.
Father took son.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran **COURT:** main
Employees present: Will
Waiver Attached (Circle one): YES or NO

Lic. 773
7727
Kim
overlab

Date of Injury: 11 / 08 / 10
Time: 7:35

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the Customer wearing: white tang-top, blue shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried jumping over one trump. and his foot caught under the red pad and snapped his ankle.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 7:35
What time did they arrive?: 7:40

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- ankle looked broken
- can't see bone
- Paramedics said it looks dislocated
- ~~[illegible]~~ - left ankle sore when he jumps

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg H **COURT:** Foam Pit
Employees present: David B.
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 10 / 10
Time: 8:48 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Red & Black Shorts, grey shirts
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:** Mother
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: Jumping in Foam pit hit knee to eyebrow split eyebrow open 3/4" gash on above eyebrow.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

Had a previous scar on there. Said he split open old scar. left ~~eye~~ eyebrow

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON

MOD: Greg F **COURT:** Main

Employees present: Vedran

Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 11 / 10

Time: 455 p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)

What was the customer wearing: Green Shirt, black/red Shorts

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? YES or (NO) **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on main - ~~jumping~~ landed on upper back/neck area causing pain in back when stretching and also said had "misty vision".

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

ICE GIVEN, parent seemed calm
[redacted] seemed calm and ok.
Jump passes given

WAIVER ENTERED. Sept 3, 2010 #116139

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran, Ryan **COURT:** ~~Bounce~~ DB
Employees present: ~~David~~ Trevor
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 11 / 10
Time: 2:47

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: white t-shirt, black pants
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Rolled her ankle in-wards on DB court while another person was on it.

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedran, Ryan **COURT:** Foam
Employees present: Jessalyn
Waiver Attached (Circle one): YES or NO

Date of Injury: 14 / 12 / 10
Time: 3:51

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: gray shirt, jeans
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Attempted a double ~~back~~ front flip and his knee hit his eye.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- Bruised under his eye
- Cut on top of his eye

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg H **COURT:** Dodge ball
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 13 / 10
Time: 5:45

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white shirt, Grey Shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** parent of friend
Phone Number: (Home) [redacted] **(Cell)** _____

HOW IT HAPPENED: Jumping normally on trampoline and landed, feeling the right knee go out of place. Knee locks dislocated

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Got mother on the phone. She refused an ambulance. Injury occured at approx. 5:45 pm. Customer was taken out on a table as requested by the customer. Customer was in extreme pain during the whole process. He was finally brought out to the car at 6:40. Almost an hour later.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SBC SEA CON
MOD: Ryan, Grey, Vedian **COURT:** main
Employees present: Ryan, Jessalyn
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 13 / 10
Time: 5:50

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white long sleeve shirt, jeans
Address: [redacted]
Phone Number: (Home)_____ **(Cell)**_____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**_____
Name of Adult accompanying child:_____ **Relationship:**_____
Phone Number: (Home)_____ **(Cell)**_____

HOW IT HAPPENED: Jumped around on main court and heard a snap in her leg. Didn't roll her ankle just heard a snap and it hurts.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:**_____

COMMENTS:

- [redacted] Provided ice

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Ryan COURT: Foam Pit
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 17 / 10
Time: 7:28

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Jeans, blue Plaid long sleeve
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Did double front flip into foam pit and hit nose to knee. Nose is scratched, slight bleeding, and looks slightly kracked.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

last in Nov 19th

INJURY REPORT

Location (circle one): SJC SAC SEA CON

MOD: Vesran **COURT:**

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 19 / 10

Time:

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: black shirt, blue shorts

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping around doing a spin and his knee blew out.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- happend before (same knee) right knee
- going to the hospital

Sept 3rd

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SBA) CON
MOD: Ryan **COURT:** ~~[illegible]~~ Main
Employees present: Alex B
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 19 / 20
Time: 9:35 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Gray sleeveless shirt, black shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: landed right foot on yellow pad and rolled it. Mild Pain

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [illegible] Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan **COURT:** Marin
Employees present:
Waiver Attached (Circle one) (YES) or NO

Date of Injury: 11 / 19 / 10
Time: 8:16

Name of Guest: [redacted] *
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Purple shirt, Jeans
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** / /

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping and felt Right knee go out of place.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Had previously injured Right knee before. States ACL.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran
COURT: foam
Employees present: Cody
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 21 / 10
Time: 6:16

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: long blk shirt, blue shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]
If Minor Was an Adult Present ?(circle one): ~~YES OR NO~~
Was Child dropped off? YES or NO
Name of Adult accompanying child: _____ If Yes by whom?: _____
Phone Number: (Home) _____ (Cell) _____ Relationship: _____

HOW IT HAPPENED: Attempted a double front flip and didn't tuck out. Hit his knee on the nose and started bleeding

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: _____

COMMENTS:
- gave ice + water
- no headaches, not dizzy

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Vedran COURT: main
Employees present: Winston, Monica
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 21 / 10
Time: 9:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: white shirt, gray shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: father
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on main court w/his brother. Tried dodging his brother and rolled his ankle on the trump.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:
- gave ice
- swelling
- might be going to the hospital

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg F. **COURT:** Main
Employees present: Tim Dixon, Andrew Wait
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 22 / 10
Time: 1:30

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Work Clothing
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Rolled ankle by landing on yellow pad. Says ankle gave out.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport Herself
Name of Person providing transport: Herself **Tel:**

COMMENTS:
Has had previous problems with same ankle.

Oct 22 19069

INJURY REPORT

LAST JUMPED 1/2/10

Location (circle one): SJC SAC SEA CON

MOD: Jump 4 COURT: Mini

Employees present: Danny B

Waiver Attached (Circle one): YES or NO

Feb 4 2010

Date of Injury: 11 / 26 / 10

Time: ~~4:50~~ 4:54

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Black Pants Green top

Address: [redacted]

Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child:_____ Relationship: _____

Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: was doing a round off and his hand missed. Possibly hyper extended left elbow

PARAMEDICS CALLED: YES or NO (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Vedian, River COURT: main
Employees present: John B, Brian
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 , 26 , 10
Time: 5:37

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main, and rolled her ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:

- gave ice
- feels fine, wants to go jumping.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 29 / 10
Time: 8:32

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white t-shirt, jeans
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumped off the wall and kept jumping. Felt his ankle roll.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:
- gave ice
- swelling on his ankle

Feb 20th, 2010

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Greg F. COURT: Fonny

Employees present: ~~11 00~~ ~~85~~ marcus, ashley H.

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 12 / 3 / 10

Time: 11:10 p

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one) (YES) or NO

What was the customer wearing: Black shirt Blue Shorts

Address: [redacted]

Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR (NO) came with friends

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: Relationship:

Phone Number: (Home) [redacted] (Cell) [redacted]

HOW IT HAPPENED: [redacted] jumping into foam pit, before jump into it left leg collapsed - breaking it (lower leg, tibia)

PARAMEDICS CALLED: (YES) or NO (circle one)

What time: 11:11 p

What time did they arrive?: 1115 p

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: Tel:

COMMENTS:

- first injury of this kind
- ice given
- no allergies known
- allegedly under the influence
- [redacted] were positioned at foam pit time of accident

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SBA CON OCY
MOD: Gregtl, Vedran COURT: foam
Employees present: David
Waiver Attached (Circle one): YES or NO

Dec. 1st

Date of Injury: 12 / 4 / 10
Time: 4:07

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: acid shirt black shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: father
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Attempted double front flip and his teeth hit his lip.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:
- Feels fine, doesn't feel light headed
- gave ice

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Hedman Greg F. COURT: mam

Employees present: winston

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 8 / 2010

Time: ~~445p~~ 442p

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO 2nd time

What was the customer wearing: all black : Shorts & Shirt

Address: [redacted]

Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: _____ Relationship: _____

Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: tried jumping off wall landed awkwardly felt ankle pop – feels as if broken

PARAMEDICS CALLED: YES or NO (circle one)

What time: 443p

What time did they arrive?: 447p

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ Tel: _____

COMMENTS:

- ice given
- requested ambulance
- wall take down
- G.F. called 911

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Greg F **COURT:** Main

Employees present: Morgan

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 10 / 2010

Time: 6:54 p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)

What was the customer wearing: glasses / white shirt, black + red shorts

Address: [redacted]

Phone Number: (Home): [redacted] **(Cell)** mom - [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? (YES) or NO **If Yes by whom?:** Aunt

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping came down awkwardly — said her felt left knee jam and 'shock' the leg

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Ice given

~~Mom~~ was w/ [redacted] BIRTHDAY party

~~pa~~ Said pain was subsiding

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Greg F. COURT: foam

Employees present: Cedy

Waiver Attached (Circle one) (YES) or NO

Date of Injury: 12 / 10 / 10

Time: 8:57 p

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): (YES) or NO

What was the customer wearing: Black shirt Tan pants

Address: [redacted]

Phone Number: (Home) [redacted] (Cell) [redacted]

360

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? YES or NO If Yes by whom?: [redacted]

Name of Adult accompanying child: _____ Relationship: _____

Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumper tried jumping in foam tripped before landing severe pain in right leg – says it's broken

PARAMEDICS CALLED: (YES) or NO (circle one)

What time: 8:55

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ Tel: _____

COMMENTS:

with youth group – weboreg 9–10p

INJURY REPORT

Location (circle one): SJC SAC SEA CON CCY

MOD: Greg & Ryan COURT: Main

Employee present: Margo

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 15 / 10

Time: 7:50

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Grey shorts grey shirt

Address: [redacted]

Phone Number: (Home)_____ (Cell)_____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child:_____ Relationship:_____

Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumping on main. Did a front flip and landed wrong. Hurt left ankle.

PARAMEDICS CALLED: YES or NO (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Ryan, Greg H. COURT: foam
Employees present: ~~Andrew~~ Marcus
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 12 / 15 / 10
Time: 6:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: Black shorts, Dark blue shirt
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO Church group
Was Child dropped off? YES or (NO) If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: Church group coordinator
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: jumping into foam pit to do flip. Felt knee pop when pushing off. Left knee.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 7:10
What time did they arrive?: 7:16

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

Has not dislocated knee before. looks dislocated (knee cap) Tried contacting mother to okay 911. Taking him to overlake. Got the ok from mother, over the phone. Mother will be meeting him at overlake Mother Stated he had knee injuries in the past

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA
MOD: Vedran
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 17 / 10
Time: 11:09

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) below (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: father
Phone Number: (Home) [redacted] (Cell) [redacted]

HOW IT HAPPENED: Jumped on main court and felt a crack on his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:
- swollen
- gave ice
- going to ER

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Vedram COURT: fetam

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 17 / 10

Time: 7:50

Name of Guest: [redacted] 2nd time

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: black shirt, red shorts

Address: [redacted]

Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: [redacted] Relationship: friend's father

Phone Number: (Home) (Cell)

HOW IT HAPPENED: Attempted a double front flip and hit nose to his knee

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: X

COMMENTS:

- Feels a little bit dizzy.
- Gave ice, feels better.

Dec 12th (waiver on file)

Gmm

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran, Ryan COURT: foam
Employees present: Hafsia
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 10 / 10
Time: 6:40

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: white shirt, green pants
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: friend's father
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Tried a front flip and hit his knee on the jaw. Bit his tongue a little bit.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: _____

COMMENTS:
- gave ice
- feels fine

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Greg + Ryan COURT: Pink

Employees present: Mattias

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 18 / 10

Time: 12:15

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Gray long sleeve, black pants

Address: [redacted]

Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

~~Was Child dropped off? YES or NO~~ ~~If Yes by whom?:~~

~~Name of Adult accompanying child:~~ ~~Relationship:~~

Phone Number: (Home) (Cell)

HOW IT HAPPENED: Rolled right ankle inverted while jumping

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

~~How is guest getting home? (Circle One):~~ ~~Relative Friend Public Transport~~

~~Name of Person providing transport:~~ ~~Tel:~~

COMMENTS:

Ice given. In little to no pain. Customer in Good spirits.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Greg F COURT: Main

Employees present: DAVE P.

Waiver Attached (Circle one): YES or NO

Date of Injury: 9/12, 19, 10

Time: 9:05 p

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Blackshirt, grey sweats

Address: [redacted]

Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: Friends

Name of Adult accompanying child: [redacted] Relationship: friend

Phone Number: (Home) (Cell)

HOW IT HAPPENED: on bounce board tried spanning and felt (r) shoulder pop out

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel:

COMMENTS:

Happened before
pain level (4)
friend taking him to urgent care

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Gang A COURT: Main

Employee present: Tim D

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 20 / 2010

Time: [redacted]

Name of Guest: [redacted] First Time Jumper (Circle one): YES or NO

DOB:

What was the customer wearing: yellow shirt black pants

Address:

Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: Relationship:

Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on bounce court. Rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport [redacted]

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Previous ankle ~~[illegible]~~ injury on same foot.
Ice given.

Addi

Phone

Signature (Participant or Parent/Guardian if under age of 18) Today's Date 12/20/2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** Farm
Employees present: Josh G.
Waiver Attached (Circle one): YES or NO

Date of Injury: 10 / 21 / 10
Time: 11:50 A

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white shirt black sweats
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** [redacted]
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried double front flip hit bridge of ~~[illegible]~~ nose w/knee ~~causing blood~~ [illegible]

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- BIOHAZARD
- Ice given
- Being Driven to overlake
- feeling a little dizzy

Entered 9/26/10 1:52p

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan, Vedran **COURT:** main
Employees present: Michael A.
Waiver Attached (Circle one): YES or NO

Date of Injury: 11 / 23 / 10
Time: 6:25

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: red shirt / blk shorts
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES ~~OR NO~~
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumped off the wall and landed on the trampoline but pulled his left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

- gave ice
- ankle swollen
- pain steady

Waiver #29088 Nov. 13th 2009

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SD CON OCY
MOD: Ryan, Greg F. **COURT:** Foam Pit
Employees present: Josh G.
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 28 / 10
Time: 2:17

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Jeans, blue shirt
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Coming off tramp on foampit and caught Left foot on yellow Pad.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

Slight swelling.
Ice given

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: main
Employees present: Javelle
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 23 / 10
Time: 8:08

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: gray t-shirt, blk shorts
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumped off the wall and his foot snapped towards. Swelling on the ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:
- gave ice (requested water)
- felt a bit dizzy
- ankle was swollen

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg H COURT: Main
Employees present: Alex B
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 21 / 10
Time: 7:15PM

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Blue Shorts, grey Shirt
Address: [redacted]
Phone Number: (Home)_____ (Cell)_____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child:_____ Relationship:_____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumping on main court. Jumping over ~~two~~ pads and landed wrong & Rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Ice given.
Customer in good spirits

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Green **COURT:** Main
Employees present: Jay
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 26 / 10
Time: 7:35

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Grey pants, Blue shirt
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping from one tramp to the other. Caught the yellow pad and fell awkwardly and hurt left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Lateral roll.
No previous ankle injury

INJURY REPORT

Location (circle one): SJC SAC ~~SEA~~ CON OCY

MOD: Gingell **COURT:** Main

Employees present: ~~No~~ Michael

Waiver Attached (Circle one): YES or NO

December 17
Skylarhogg 2009

Date of Injury: 12 / [illegible] / 10

Time:

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: Black Shirt Khaki

Address: [redacted]

Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on Main court. Tried to land a backflip. Landed wrong.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

Refused to give information. ~~for~~ Friends were rude and unwilling to help.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Mon PM COURT: MAIN
Employees present: AlexB
Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 29 / 10
Time: 6:30pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Red white Shirt, black pants
Address:
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main rolled right ankle,

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

In little to nopain

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Greg H COURT: Kids

Employees present: Winston

Waiver Attached (Circle one): YES or NO

Webrey

Date of Injury: 12 / 29 / 10

Time: 3:20pm

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Purple shorts, black & grey shirt

Address:

Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom? [redacted]

Name of Adult accompanying child: Relationship: Friends mother

Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Jumping from couch to couch and landed wrong. Hurt left ankle

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transpo[redacted]

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

COURT: main

MOD: Graf

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 12 / 31 / 10

Time: 740p

Name of Guest: [redacted]

First Time Jumper (Circle one): YES or NO

DOB: [redacted]

What was the customer wearing: Green plaid shirt, jeans

Address: [redacted]

Phone Number: (Home) [redacted] (Cell) n/a

If Minor Was an Adult Present ?(circle one): YES OR NO

If Yes by whom?: new uncle Lurch

Was Child dropped off? YES or NO

Name of Adult accompanying child: Relationship:

Phone Number: (Home) (Cell)

HOW IT HAPPENED: jumping, slipped ~~to~~ on trampoline hurting Ankle (L)

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: Tel:

COMMENTS:

ice given
original waiver in kewlfe cuyout 2 of 3.

INJURY REPORT

Location (circle one): SJC SAC SEA CON CCY
MOD: Greg H **COURT:** Kelly K.
Employees present: foamPit
Waiver Attached (Circle one): YES or NO

Date of Injury: 12, 31, 10
Time: 5:45

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: green Shert, purple Shirt
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping into foam pit. Tried to do a backflip and clipped ~~right~~ left foot on yellow pad

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Vedran
Employees present: Micheal E.
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 13 / 11
Time: 6:40

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: During the aerobics she was jumping over the yellow pad and ~~[illegible]~~ her left foot ~~[illegible]~~ tripped over pad, forcing all the weight on her right ankle. Felt her ankle pop out and back in.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: her self Tel: above

COMMENTS:

- gave ice
- ankle got swollen
- felt dizzy
- didn't want medical attention

INJURY REPORT

SKYHIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA)
MOD: Vedran
Employees present: Charlotte (Private court)
Waiver Attached (Circle one): YES or NO

Date of Injury: 01 / 13 / 11
Time: 8:35

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Attempted a flip and ran into someone jumping. His right ankle went under the yellow pad. Ankle is swollen, he thinks it's broken.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 8:34
What time did they arrive?: 8:40

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- gave ice
- pain doesn't increase
- Paremedics are not sure if it's broken (might be dislocated or sprained).

INJURY REPORT

Location (circle one): SJC SAC SEA

MOD: Greg F

Employees present: Ashley

Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 14 / 11

Time: 730p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one)** YES or

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: [redacted] **Relationship:** [redacted]

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried backflip off wall Trampoline landing awkwardly and injuring ankle (R)

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- ice Given
- w/ BDAY party
- party Dad taking to hospital/urgent care
- Dad is on way to Sky High
- refused Paramedics

INJURY REPORT

Location (circle one): SJC SAC SEA

MOD: Greg F.

Employees present: David Morgan

Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 14 / 11

Time: 1130p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO n/a

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried backflip off wall when landing felt knee (L) 'pop' after feeling the knee go left and right.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted]

COMMENTS:

- ice given
- Said pain level was 4/10
- friends looking after her
- Happened back of main
- ~~Says pain is fine~~
- refused paramedics

INJURY REPORT

Location (circle one): SJC SAC SEA

MOD: Greg F.

Employees present: Morgan, David

Waiver Attached (Circle one): YES or NO

LM / AUSTIN 1/19

Date of injury: 1 / 14 / 11

Time: 710 p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: main court landed on yellow pad – heard a pop in ankle (R)

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- kidding about bone sticking out of foot
- in good spirits
- friends taking to urgent care
- walked out w/o help
- jump pass given

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg F. **COURT:** Doall
Employees present: David
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 1 / 15 / 11
Time: 8p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: twisted ankle (R) jumping trampoline to trampoline

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

called and spoke w/ parent - [redacted]
pain level 8/10
Can move toes
Previously broke same ankle
passes given

INJURY REPORT

Location (circle one): SJC SAC SEA CCN
MOD: Greg F. **COURT:** Main
Employees present: David Morgan
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 15 / 11
Time: 10:26 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: [redacted]
Address:
Phone Number: (Home) **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: N/A **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Got Double bounced, hyperextended knee (L) after trying backflip

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Ice Given
calling mother
- Hyperextended same knee Before
1st time here 2 mos ago

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedron COURT: foam
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 16 / 11
Time: 9:42

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child:_____ Relationship:_____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Tried a triple front flip and hit his knee in face. His lip is swollen, feels like he needs stitches.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted]

COMMENTS:
- gave ice
- washed out his mouth

-[illegible]

Emailed to Keith 1/16/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) Main

MOD: Ryan

Employees present: Trevor

Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 16 / 11

Time: 4:35

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (no)

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? ~~YES or NO~~ **If Yes by whom?:** _____

Name of Adult accompanying child: _____ **Relationship:** _____

Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Flipping on main court and hit knee to nose. Nose is crooked.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport Self

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

In little pain.
Having friend pot back in place (EMT).
WOF: Sept 2, 2010

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran COURT: main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 17 / 11
Time: 5:39

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Jumping [redacted] friends on the same [redacted] trampoline and got double bounced. Rolled her ankle, small swelling.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- gave ice
- pain decreased

faxed to Keith 1/17/11 (still searching for waiver)

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD: Gareth

Employees present: Alyssa

Waiver Attached (Circle one) YES or NO

Date of Injury: 1/17/11

Time: 2:03

Name of Guest: [redacted]

DOB: [redacted]

First Time Jumper (Circle one): YES or

Address:

Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]

Name of Adult accompanying child: **Relationship:** [redacted]

Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Tried to do a front flip and kneed himself in the mouth. He was in the foam pit when the incident occured.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: **Tel:**

COMMENTS:

- Ice was given
- Mother & Son were in good spirits

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAG SEA CON OCY
MOD: [illegible] COURT: Main
Employees present: Hafsia
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 21 / 11
Time: 10:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on main court, landed wrong and rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: [redacted]

COMMENTS:

- Refused ambulance
- Ankle very sudden.
- Friends drove her to Overlake.
- Ice given.

INJURY REPORT

Location (circle one): SJC SAC (SEA)
MOD: Vedran
Employees present: foam
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 22 / 11
Time: 3:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present?(circle one): YES OR NO
Was Child dropped off? (YES) or NO **If Yes by whom?:** mom
Name of Adult accompanying child: [redacted] **Relationship:** mom
Phone Number: (Home) _____ **(Cell)** above

HOW IT HAPPENED: Front flip and kneed him self in the mouth. [redacted] small cut on his lip.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- gave ice
- feels better

Faxed to Keith 1/23 (no waiver form yet)

faxed 1/22

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA)
MOD: Vedran
Employees present: John B.
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 22 / 11
Time: 9:34

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) (YES) or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Attempted a back flip, landed hard on his shin.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 9:34
What time did they arrive?: 9:40

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- gave ice
- pain went down, feels like he doesn't need to go to the hospital.

INJURY REPORT

Location (circle one): SJC SAC SEA

MOD: Greg H

Employees present: Trevor

Waiver Attached (Circle one): YES or NO

Jan. 6
Feb. 19
Dec. 22

Date of Injury: 1 / 23 / 11

Time: 2:10

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: [redacted] **Relationship:** Friend ([redacted] parent)

Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: Jumping on main court. Rolled right ankle.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Mom came to pick him up.
Ice was given.
Taking him to children's in Bellevue or evergreen
• Overheard the mother say he has fragile bones

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA
MOD: Greg F.
Employees present: Brian K.
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 29 / 11
Time: 445p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Standing on PVT CT WAITING for game to Start, knee (L) 'popped' while bouncing

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

In good spirits
Ice Given
Jump pass Given
* NOT entirely Certain what's hurting — Only her knee

FTK 1/29

VWM

INJURY REPORT

Location (circle one): SJC SAC (SEA)
MOD: Veoran Gregh main court
Employees present: charlotte
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 30 / 11
Time: 4:05

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumped off the side wall and rolled his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

- gave ice
- ankle was swollen
- going to the hospital to get it checked out.

faxed to Keith 1/30 (m)

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA
MOD: Greg H
Employees present: Trevor & Jordan
Waiver Attached (Circle one): YES or NO

Date of Injury: 1 / 30 / 11
Time: 11:45 am

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court. Rolled left ankle. Possibly jumped off the wall when incident.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Heard it crack
- Ice given
- Previous ankle History
- wearing shoes

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan & Greg **COURT:** Main
Employees present: Andrew
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 4 / 11
Time: 1:25 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:** [redacted]
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: [redacted] was double bounced by another customer who was jumping off the wall and the landed on the same trampoline [redacted] was just coming onto main court.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Parents taking him to Overlake Hospital
- Full Refund given.
- Reviewed the tapes to see that [redacted] was double bounced
- Very few jumpers on the Court

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 4 / 11
Time: 615 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white shirt / red+white shorts
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** N/A
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping on main – felt as though she was double bounced and landed on yellow pad hurting ankle (L) Back of ankle hurts alot

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Barefoot
- [redacted] BDay (group)
- Can move toes
- ~~going t~~ Left on crutches
- jump pass given
- Came with basketball group, and after injury group decided to leave for fear of further injury due to basketball season

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan COURT: PVT
Employees present: Andrew
Waiver Attached (Circle one) YES or NO

Date of Injury: 2 / 5 / 11
Time: 2:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: ~~Black Shirt~~, Green shorts No shoes
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor ~~Was an Adult Present~~ ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on PVT court and rolled (Rt) ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport Self
Name of Person providing transport: _____ Tel: _____

COMMENTS:

Slight swelling
Has injured ankle before
States he is okay

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Freeight COURT: Main
Employees present: Tim D
Waiver Attached (Circle one): YES or NO

Front desk
Female

Date of Injury: 2 / 6 / 11
Time: 11:15

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Jeans, Peach top
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumping on main court. Tried to jump over double trampoline - Lost her balance and landed on right shoulder.

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

No previous shoulder injuries
Will be seeing her own doctor
Was wearing shoes.
Burning feeling in her shoulder.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg H **COURT:** main
Employees present: Jay V
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 11 / 11
Time: 2:45

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black long ~~sl~~ sleeve, Black Shorts
Address:
Phone Number: (Home) **(Cell)** [redacted]

~~**If Minor Was an Adult Present ?(circle one): YES OR NO**~~
~~**Was Child dropped off? YES or NO**~~ ~~**If Yes by whom?:**~~
~~**Name of Adult accompanying child:**~~ ~~**Relationship:**~~
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court. Jumping off the wall. While landing twisted left knee.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend ~~Public Transport~~
Name of Person providing transport: **Tel:**

COMMENTS:

- ~~Ice~~ No previous knee History
- Wearing Shoes.
- Some Swelling
- Ice given
- With the UW Tacoma group

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Main
Employees present: James Dixon
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 11 / 11
Time: 12:10 Am (Bryant)

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Jeans / Shirt / Barefoot
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Tried front flip off wall landed awkwardly and said he felt a pop.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Said he may go to hospital to have it looked at. Seemed in good spirits.

FTK

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** PVT LT
Employees present: Jessalyn
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 12 / 11
Time: 7:40p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Blue Shorts, white t-shirt
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO n/a
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Throwing Dodgeball says he threw out shoulder (R) may have "popped out"

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Himself **Tel:**

COMMENTS:

- Pain Level: 6/10
- Ice Given
- Has happened previously
- going to overlake urgent care

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F **COURT:** foam
Employees present: David Morgan
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 12 / 11
Time: 940p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: black shirt, jeans
Address: [redacted]
Phone Number: (Home) N/A **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumped into foam pit head first – landed on head first felt neck compress and ~~neck~~ some popping in neck

PARAMEDICS CALLED: YES or ~~NO~~ (circle one)
What time: 9:50p
What time did they arrive?: N/A

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Ice Given
- Appears pale / feels dizzy
- Says he feels like he's now recovering (feeling less dizzy)
- will see Chiropractor on Monday
- neck pain 1 out of 10

→ when standing up felt light headed, called 911

→ Friend decided it would be quicker to drive to hospital than have paramedics

→ [redacted] walked to car under own power

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Gregg, Ryan, Vedran **COURT:**

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 12 / 11

Time: 12:05

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: white shirt, red pants ([redacted] with shoes)

Address: [redacted]

Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: [redacted] **Relationship:** [redacted]

Phone Number: (Home) _____ **(Cell)** above.

HOW IT HAPPENED: Walked on main court and rolled his ankle on the yellow pad.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** above

COMMENTS:

- gave ice
- swelling on his right ankle
- going to emergency room

FTK 2/12 (MD)

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON CCY

MOD: Greg F. **COURT:** main

Employees present:

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 12 / 11

Time: 1:35 p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)

What was the customer wearing: Black shirt, black shorts

Address:

Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO) Mother: [redacted]

Was Child dropped off? YES or (NO) w/friend **If Yes by whom?:** n/a

Name of Adult accompanying child: **Relationship:**

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping on main – came down awkwardly on ankle (R)

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- pain level 6 of 10
- ice given
- barefoot
- can't move toes
- called parent (Father Shawn)
- has hurt ankle (R) previously
- thinks it may be broken
- helped out w/ crutches to car

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY

MOD: R-jay, Greg H, Victor **COURT:** main

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 12 / 11

Time: 1:14

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)

What was the customer wearing: white shirt, black pants

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO – Not when it happened

Was Child dropped off? YES or NO [redacted] **If Yes by whom?:**

Name of Adult accompanying child: [redacted] **Relationship:** (party mom)

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Double bounced on main court and his foot twisted. Feels like his ankle hurts. (no shoes)

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- gave ice
- pain went down.

FTK

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: [illegible]
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 12 / 11
Time: 6:40

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: blue shirt, jeans
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: father
Phone Number: (Home) (Cell) above

HOW IT HAPPENED: Attempted a double front flip and his knee hit his front teeth. One of his teeth is half way chipped

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:
- gave ice
- Parents gave his asprin.

Searching for waiver

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Graf. **COURT:** Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 16 / 11
Time: 2:15 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Light Gray Sweatshirt, black pants
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping on main court landed awkwardly twisting Ankle (L)

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Ice Given
- can move toes, jumping barefoot
- pain level 7 of 10
- no medical attention needed
- She is calm
- pain

INJURY REPORT

Location (circle one): SJC SAC SEA CON
MOD: Greg F. COURT: main (back)
Employees present: Ryan B.
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 18 / 2011
Time: 745 p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: jumping on main trampoline to trampoline when someone got in his way and rolled ankle (L) – Heard loud pop

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport – [redacted]
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- Ice given
- with [redacted]
  ~~EBF~~
- Said rolls ankle consistently
- pain level 7 of 10
- called mother, left message

WCF 10-2-10
1165713

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (BEA) CON
MOD: Ryan, Greg COURT: Main
Employees present: Jessyln
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 18 / 11
Time: 8:10

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: [redacted] Shoes
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor-Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Rolled Lt ankle. Jumped from tramp to tramp after coming off wall. Lost balance and tried to catch self w/ left foot.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Self Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

3 passes given
Has jumped here multiple times.
Said he would be back next week.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Josh **COURT:** Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 19 / 11
Time: 4:00

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one)** (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: rolled ankle coming off of side wall on main court

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- ice given
- wearing appropriate clothing
- seemed like he will be o.k.

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedan COURT: main
Employees present: Ryan, Brian
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 19 / 11
Time: 10:10

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on main court, and jumped off the side wall. His left foot got caught in between the red pad. Rolled his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: _____

COMMENTS:

- gave ice
- rolled his ankle before
- was wearing shoes

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Foam pit
Employees present: Michael Epperson
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 2 / 25 / 11
Time: 12:30

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** mother
Phone Number: (Home) same **(Cell)**

HOW IT HAPPENED: Jumped into foam pit. Landed head first. Started feeling a little dizzy and woozy

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** same

COMMENTS:

Jumper may have been a little scared. Felt a little dizzy and tired. Mother has a Dr's appointment later in the day and will be bringing daughter in to get checked out.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: Main
Employees present: Maddie
Waiver Attached (Circle one): (YES) or NO

Date of injury: 2/25/11
Time: 1:40

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Mom
Phone Number: (Home) [redacted]

HOW IT HAPPENED: Bounced off wall, Landed wrong and rolled ankle/foot on pad

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel: Same

COMMENTS:

Something looked different than other foot. Was in considerable pain. Mom will be taking her to hospital.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** main (Back)
Employees present: David Morgan,
Waiver Attached (Circle one): YES or NO

Date of Injury: 2 / 25 / 11
Time: 830 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: [redacted] shirt
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO (Drove) **If Yes by whom?:** _____
Name of Adult accompanying child: N/A **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED:
Trying a flip off wall - under rotated and injured neck

PARAMEDICS CALLED: YES or NO (circle one)
What time: 830
What time did they arrive?: 835

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: ~~Ambulance~~ **Tel:** _____

COMMENTS:

- Concious, talking - Explained what happened to me. Pain 5 of 10, cold more toes
- called Father [redacted] to let him know situation
- Ice Given, Bare foot
- was with a group of friends
- Has had Back Injuries from snowboarding previously (slipped discs)
- leaving car at Sky High for father to pick up (Steve have his keys, jacket + phone

[redacted]

- Left on backboard and neck brace

WOF March 16, 2010

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Ryan **COURT:** Main Aerobics
Employees present: Trisha (Aerobics Instructor)
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 1 / 11
Time: 6:48

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If ~~Minor Was an Adult~~ Present ?(circle one): YES OR NO
Was Child dropped off? ~~YES or NO~~ **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main court during aerobics and felt Rt knee "slip" out of place. Jumping in center of tramp.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Self) Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- Ice given
- wearing shoes
- no pain, no swelling
- over 15 jumps in history
- one free pass given

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedan/Josh **COURT:** Main
Employees present: Tim Dixon
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 3 / 2 / 11
Time: 5:03 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: [redacted]
Address:
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO **If Yes by whom?:** Lynn Wheeler
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: landed Awkwardly after a flip on the trampoline. says his [redacted] upper back foot area hurts up to the upper back ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Ice given. In pain. No previous injuries with this leg

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg F / Josh COURT: Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 3 / 4 / 11
Time: 6:50

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES (or) NO
What was the customer wearing: Jeans, shoes
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping off of wall, jumped big then landed wrong right next to yellow pad and ankle buckled under him

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 6:55
What time did they arrive?: 7:00

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Father
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given.
- paramedics arrived within minutes
- said he felt a pop
- Father taking him to hospital
- has rolled ankle Before but never this Bad.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Grey H COURT: Dodge ball
Employees present: Matt S
Waiver Attached (Circle one) YES or NO

Date of Injury: 3 / 4 / 11
Time: 3:00

Name of Guest: [redacted]
DOB: First Time Jumper (Circle one): YES or NO
What was the customer wearing: Black shoes, Black Shoes
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on dodgeball. jumping from trampoline to trampoline. Right ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

- Ice Given
- Able to stand on ankle
- Wearing shoes, Hi top shoes
- Seemed to be in very little pain.
- Driving himself

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Freight COURT: Main
Employee present: Winston
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 4 / 11
Time: 1:23

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Blue shirt, blue/white shoes
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: Mom
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Jumping on main court. Tried to jump to another trampoline. Rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Ice given.
Not wearing shoes.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg F, Josh **COURT:** Mark
Employee present: Winston Dawkins
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 5 / 11
Time: 1:40

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Shorts, low top Nike shoes Shox
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Friend was underneath him. says he tried to slow up and got his ankle caught up on the trampoline and rolled it.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Himself **Tel:** _____
(says he can drive with other foot)

COMMENTS:

- ice given
- wearing athletic clothes
- previous sprain on same ankle
- seems to be in minimal pain, good spirits
- swelling

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA

MOD: ~~Veteran~~ Greg H

Employees present: Andrew

Waiver Attached (Circle one): YES or NO

FD

Date of Injury: 3 / 8 / 11

Time: 6:14

Name of Guest: Paul Ward

DOB: 7/13/84

First Time Jumper (Circle one): YES or

Address: 19705 68th Ave West

Phone Number: (Home) _____ **(Cell)** 425-971-7722

~~**If Minor Was an Adult Present ?(circle one):** YES OR NO~~

~~**Was Child dropped off? YES or NO**~~ ~~**If Yes by whom?:**~~

~~**Name of Adult accompanying child:**~~ ~~**Relationship:**~~

~~**Phone Number: (Home)**~~ ~~**(Cell)**~~

HOW IT HAPPENED: Jumping on main court. Jumped off the wall and landed on the yellow pad. Rolled right ankle.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

Ice given.

INJURY REPORT

Location (circle one): SJC SAC SEA

MOD: Grey #

Employees present: Andrew

Waiver Attached (Circle one): YES or NO

Sept 28th

Date of Injury: 9 / 16 / 11

Time: 4:40

Name of Guest: [redacted]

DOB: [redacted]

First Time Jumper (Circle one): YES or

Address: [redacted]

Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

~~Was Child dropped off? YES or NO~~ If Yes by whom?: _____

~~Name of Adult accompanying child:~~ _____ ~~Relationship:~~ _____

~~Phone Number: (Home)~~ _____ ~~(Cell)~~ _____

HOW IT HAPPENED: Jumping on main court on the ~~trap~~ tumble tramp. Jumping with friends when injury happened. Hurt right ankle

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice gum
- History of Sprains
- Discounted $250 weekend party to $200 weekday party. BB
- Not wearing shoes.

File 3/10/11

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg F COURT: mum
Employees present: Greg H
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 3 / 12 / 2011
Time: 230 p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: tank top pants
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Came down awkwardly on ankle (L)
Says it was rolled severely - felt "tear" in ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- ice given
- going to visit Doctor to get x rays
- Jumping Barefoot
- could move toes

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: main
Employees present: Sean, Monica
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 12 / 11
Time: 9:59

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: red shirt, black shorts (shoes)
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship:
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Jumped off the wall and hurt his leg. Both parents and the kid were not willing to speak to anyone. Didn't comply to anything I said.

PARAMEDICS CALLED: YES or NO (circle one)
What time: — they called
What time did they arrive?: 9:53

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

- Brough ice (refused it)
- Refused to give any information (got it from the kid's waiver)

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Ryan COURT: Main
Employees present: Brian, Andrew
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 3 / 15 / 11
Time: 8:00

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: [redacted] shoes
Address: [redacted]
Phone Number: (Home) _____ (Cell) _____

If Minor Was an Adult Present ?(circle one) (YES) OR NO
Was Child dropped off? YES or (NO) If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: Mother
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: flipped off wall, under-rotated and hit Right leg on yellow pad parallel to red (wall) pad.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 8:00
What time did they arrive?: 8:05

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- Mother present, 911 call by [redacted]
- Ice given
- Rt shin in extreme pain

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg F. **COURT:** middle main
Employees present: DAVID morgan, Michael Eggleston, Trevor Byram
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 3 / 18 / 2011
Time: 11:10 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO (N/A)
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Running on Trampoline wall, jumped off trying to land on tumble track – landed on yellow pad and leg gave out. Compound fracture (R) leg

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 11:10 p
What time did they arrive?: 11:17 p

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**
Was with friend [redacted]

COMMENTS:

- Ice given, Shoes on
- was calm when reached Brian, friend (Cam) was pretty shaken up.
- First type of Injury w/ broken bone
- Wall take-down for paramedics
- Spoke with Father [redacted] about Injury – Meeting [redacted] at Hospital
- paramedics going to overlake hospital

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON
MOD: Greg F. **COURT:** Dodgeball
Employees present: David Morgan
Waiver Attached (Circle one): YES or NO still searching

Date of Injury: 3 / 20 / 2011
Time: 7:50 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: [redacted]
Address:
Phone Number: (Home) **(Cell)** [redacted] or [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO n/a
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on dodgeball when ankle rolled (L)

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Driving himself **Tel:**

COMMENTS:

Ankle (L)
· feels numb – tingling
· ice given
· in good spirits

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON
MOD: Greg F. COURT: Nina
Employees present: Alyssa
Waiver Attached (Circle one): YES or (NO) still searching

Date of Injury: 3 / 20 / 2011
Time: 705p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: [redacted]
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: jumping - tried doing front flip and didn't land properly injuring knee (R)

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:

- ice given
- Refunded purchase
- pain level at 5 of 10

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran COURT: DB
Employee present: Jessalyn
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 23 / 11
Time: 8:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping around, trying to dodge a ball and twisted her ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: _____ Tel: [redacted]

COMMENTS:
- gave ice
- no swelling
- feels better

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: [illegible]
Employees present: Trevor, Monica
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 25 / 11
Time: 4:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted] of [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: friend
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Jumped off the wall and fell on the trampoline. Her knee cap looked dislocated.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 9:31
What time did they arrive?: 9:35

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- gave ice
- in lots of pain
- Friend's parent was there and didn't know some of the info.
- [redacted] was in too much pain to talk

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedan, Greg **COURT:** main
Employees present: Trevor, chase, merleish
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 26 / 11
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Running on main [redacted] court and tripped over the yellow pad. He fell on the red pad and broke his collar bone.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** same

COMMENTS:
- gave ice
- going to the hospital

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Main
Employees present: John B
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 26 / 11
Time: 9:05

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Athletic clothing, Nike shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:**
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Landed awkwardly half on yellow pad and half on trampoline. Rolled ankle. Ice given

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- has previous ankle issues
- wearing shoes
- Ice given

Searching for waiver

[redacted]

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran, Greg **COURT:** main
Employees present: Phil, Hafsia
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 27 / 11
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: white shirt, shorts, w/shoes
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court and jumped off the wall, lost balance and twisted his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Driving **Tel:**

COMMENTS:

- Broken same ankle before
- pain level 8 (1-10)
- gave ice
- lots of swelling

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran **COURT:** DB
Employees present: Kristin
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 31 / 11
Time: 6:26

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on dodge ball court and [redacted] bumped into another jumper. Hurt her knee and felt like the pain shocked down to ~~[illegible]~~ bottom of her foot.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Stacy **Tel:**

COMMENTS:

- gave ice
- previous knee problems (runs in the family)

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Ryan, Vedar COURT: foam
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 31 / 11
Time: 4:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) (YES) or NO
What was the customer wearing: orange jacket, jeans (no shoes.
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one) YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on foam pit and caught her right foot under the yellow pad. Twisted her right ankle.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 4:32
What time did they arrive?: 4:40

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- gave ice
- swelling around her ankle

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran **COURT:** main
Employees present: Kristin, Jessalyn
Waiver Attached (Circle one): YES or NO

Date of Injury: 3 / 31 / 11
Time: 9:37

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: gray t-shirt, black shorts (with shoes)
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** [redacted] friend
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Jumping on main off the wall and rolled his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** above

COMMENTS:

- gave ice
- swelling

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Cregg & Josh COURT: Main
Employees present: John B
Waiver Attached (Circle one): YES or NO

Microsoft party

Date of injury: 4 / 1 / 11
Time:

Name of Guest: [redacted]
DOB: 2:00 First Time Jumper (Circle one) YES or NO
What was the customer wearing: Black Shorts Blue Shirt
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
~~Was Child dropped off? YES or NO~~ ~~If Yes by whom?:~~
~~Name of Adult accompanying child:~~ ~~Relationship:~~
~~Phone Number: (Home)~~ ~~(Cell)~~

HOW IT HAPPENED: Jumping on main court & Jumped from one trampoline to the other and rolled left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- wearing shoes
- No previous history of ankle injuries
- Ice given
- In little pain at the time of the injury. Checked back in with the customer and stated it was "Pretty Painful".

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Gray F. **COURT:** main
Employees present: David McVegan
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 2 / 2011
Time: 7p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: black sweats, Gray Shirt, Shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: finishing jump time rolled ankle (L) coming off trampoline — heard ankle pop

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: drives self **Tel:** _____

COMMENTS:

- Ice given
- Pain level 3 of 10
- was feeling ok after elevating w/ ice

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Greg F. **COURT:** main

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 3 / 11

Time: 505 p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: Blue shirt, black short, shoes

Address:

Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO MO **If Yes by whom?:**

Name of Adult accompanying child: [redacted] **Relationship:** Mother

Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Rolled ankle (L) after someone jumped on trampoline before him (double bounced)

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- pain level 6 of 10
- ice given
- crutches to get to car
- pass given to him

Doe: Nov. 27th 2009

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Cindy H COURT: Main
Employees present: Ashley
Waiver Attached (Circle one): YES or NO

Date of injury: 4/4/11
Time: ~~Tuesday~~ 11:45

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: White Socks Black
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: [redacted]
Name of Adult accompanying child: [redacted] Relationship: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

Fire Dept Dispatched Splinted up Crutches Fetted taken him to Oasis

HOW IT HAPPENED: Jumping on main court. Tried to do a flip off the wall. Landed and hurt heel/foot. Right foot.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 11:55
What time did they arrive?: 12:05

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

~~taken son to ondake~~
Not wearing shoes
Ice given
complaint of Back Pain AB

Dispatched at 12:10 pm

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg, Vedran **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 4 / 11
Time: 3:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: black shirt, shorts (with shoes)
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main court and another jumper cut him off and twisted his ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: him self **Tel:** alone

COMMENTS:

- gave ice
- lots of swelling.

Jan. 22nd 2010
waiver on file

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: Main
Employees present: Andrew Wait
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 / 5 / 11
Time: 1:10 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: Shoes, Jeans, sweatshirt
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO [redacted] If Yes by whom?: [redacted]
Name of Adult accompanying child: [redacted] Relationship: youth group leader
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on Mini court. Fell down and someone landed on ankle. Wearing bowling shoes

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- Ice given
- Came with group.
- Seems to be in a lot of pain
- Swelling
- will wait until she gets home to go to hospital

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Grey A COURT: Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 5 / 11
Time: 1:48

Name of Guest: [redacted]
DOB:
First Time Jumper (Circle one) (YES) or NO
What was the customer wearing: Purple pants, t Shirt
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main court. Tripped over yellow pad and hit her head on the railing.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

- Ice given
- Customer in good spirits
-

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg H COURT: Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 5 / 11
Time: 1:15

Name of Guest: [redacted]
DOB: _____ First Time Jumper (Circle one): YES or NO
What was the customer wearing: Black Shirt, Black shorts
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on main Court, Landed wrong on left ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- Ice given
- Wearing Shoes

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of injury: 4 / 6 / 11
Time: 6:45pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: green [redacted] shirt, jeans (shoes)
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main court and landed wrong, twisting her ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** above

COMMENTS:

- gave ice
- feels like the pain [redacted] decreased
- some swelling

Still searching for waiver (VD) 4/6

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON CCY
MOD: Veteran **COURT:** ~~[illegible]~~ main
Employees present: Evan
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 6 / 11
Time: 4:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:** mom
Phone Number: (Home) **(Cell)** above.

HOW IT HAPPENED: Jumping on main court, and attempted a back flip when his friend got in a way and kneed him in the face.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** above

COMMENTS:

- feels dizzy
- jumped around for a little bit more 45 min.
- had a concussion from before

Sept. 26th 2009 searching 4/6

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg Forster **COURT:** Foam
Employees present: Steven Gilbert
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 7 / 2011
Time: 3:35 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: yellow shirt, green shorts — no shoes
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Tried a front flip - didn't rotate enough landing on head. ~~[illegible]~~ Heard a snap and white flash when landing. (right of neck & shoulder hurting)

PARAMEDICS CALLED: (YES) or (NO) (circle one)
What time: ~~[illegible]~~ 4:10p
What time did they arrive?: 4:15p

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: mother **Tel:**

COMMENTS:

- Got out of Foam Pit by himself
- Ice Given & pass 1 hr
- Says pain is 6 of 10 - very painful when moving
- mother & [redacted] Calm & Cooperative - [redacted] talking and coherent after asking day of week and birthday
- pain hasn't subsided after 15 min
- mother seems as though it's not as bad as [redacted] is making it to be.
- Said no to paramedics after recommending

UPDATE: calling paramedics as precaution — taken to Overlake

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: Pit
Employees present: Kelly
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 7 / 11
Time: 8:40

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: green shirt, jeans (no shoes)
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom? _____
Name of Adult accompanying child: [redacted] Relationship: Youth pastor
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Attempted a back flip on pit court and landed on his back. Got the air knocked out.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:

- gave water
- got his breath back
- feels much better

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 7 / 11
Time: 6:10

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) **(Cell)** above.

HOW IT HAPPENED: Doing a flip on main court and hit her face on the yellow pad.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** above.

COMMENTS:

- Head hurts
- gave ice
- feels better

WOF: March 29th 2011
searching for waiver

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** main
Employees present: David Ingram
Waiver Attached (Circle one): YES or NO

Date of injury: 4 / 7 / 2011
Time: 2:07 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Flipped off wall — landed on ankle (R) with all his weight rolling it.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

- 5 jump cards Given for two hours
- little to no Swelling
- Ice given

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg H COURT: Main
Employees present: Tim D.
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 4 / 8 / 11
Time: 8:33

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on Main court, leg gave out. Jumped off the wall.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 8:34
What time did they arrive?: 8:40

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

- No Shoes
- Talked to mother via phone letting her know about the accident.

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: [illegible] **COURT:** Main
Employees present: Tim
Waiver Attached (Circle one): YES or NO

waivers at front desk.

Date of Injury: 4 / 8 / 11
Time:

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black Shorts brown shirt
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Jumping on main court. Rolled right ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

Ice glen
not wearing shoes

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg F. **COURT:** main
Employees present: Josh Gallant
Waiver Attached (Circle one): (YES) or NO

Date of injury: 4 / 9 / 2011
Time: 4:50p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black Shirt, Blue jeans – Barefeet
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(Circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Father thinks he jumped fell ~~[illegible]~~ ~~as~~ landing arm underneath him – Father thinks arm (R) is broken

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 4:50p
What time did they arrive?: 4:57p

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- Paramedics arrived quickly
- Tenzin unable to tell me exactly what happened
- Father had back turned when happened
  - upset about rule w/ no cell phone on court because ~~court monitor~~ + accident happened when court monitor was enforcing rule.
- Ice given

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Gryfmster **COURT:** Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 10 / 2011
Time: 530 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Salmon colored Shirt, Jeans - bare foot
Address:
Phone Number: (Home) **(Cell)** [redacted] - mother Jennifer

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO **If Yes by whom?:** Party mom
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: landed wrong twisting ankle (L)

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

- Mother coming to pick her up
- Ice Given & slushie
- Here last time for [redacted] B Day party few weeks ago
- Difficult to move toes

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** main
Employees present: David morgan
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 10 / 2011
Time: 10 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Blue Shirt, Blue Jeans - Shoes
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumped off wall landing awkward and rolling ankle (L)

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Driving self **Tel:** _____

COMMENTS:

- helped out on crutches
- Going to doctor's tomorrow.
- Calm
- Ice given
- Can move toes

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran **COURT:** main
Employees present: Billy, Winston
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 14 / 11
Time: 7:44

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: gray jeans, purple shirt
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main and attempted to jump over the yellow pad but landed wrong and rolled her right ankle.

PARAMEDICS CALLED: YES or ~~NO~~ (circle one)
What time: 7:49
What time did they arrive?: 7:53

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- gave ice
- shoes on
- swelling
- over heard the paramedic say "it's not broken".

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** Dodgeball
Employees present: Winston Dawkins
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 23 / 11
Time: 2:25 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black fleece, jeans, shoes
Address: [redacted]
Phone Number: (Home) DAD **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** Aunt
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Friend jumped on foot twisting ankle (R)

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

Pain level 7 of 10
Ice given
Ibuprofen given
Accompanied w/ family

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg F. **COURT:** Main
Employees present: Ryan Kettels, Brian Kibbler
Waiver Attached (Circle one): YES or (NO)

Date of Injury: 4 / 23 / 11
Time: 1:55 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: [redacted]
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Doing front flip landed on ankle (R) awkwardly

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

- Had previously twisted same ankle lightly the night before
- pain level 7 of 10
- feeling better after ice and rest
- Calling parents about incident. left msg.

waiver: Notified Oct 11th 2009

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC (SAC) SEA CON OCY
MOD: Ryan Pile COURT: Main Court
Employees present: Caleb S.
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 24 / 11
Time: 8:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: white shirt & Green pants.
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: was doing a backflip on main Court and landed wrong on her ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: —
What time did they arrive?: —

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

Gave ice and crutches.
Under 18. spoke w/ mother on phone @ 8:40 pm.
- Asked if we should call paramedics or not.
- Do not call 911 → parents will pick-up
Mother's name - [redacted]

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Greg F. COURT: foam pit

Employees present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 24 / 2011

Time: 730p

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: jeans, black tee - no shoes

Address:

Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: Relationship:

Phone Number: (Home) (Cell)

HOW IT HAPPENED: kneed himself in nose doing front flip into foam pit - thinks he broke it

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- re-set it himself
  his nose
- ice & nose ~~sto~~ plug given

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg H. / Ryan **COURT:** Main
Employees present: John B., Christy
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 4 / 29 / 11
Time: 1:33 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Purple long sleeve, black pants, shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

~~**If Minor Was an Adult Present ?(circle one):** YES OR NO~~
~~**Was Child dropped off? YES or NO** **If Yes by whom?:**~~
~~**Name of Adult accompanying child:** **Relationship:**~~
~~**Phone Number: (Home)** **(Cell)**~~

HOW IT HAPPENED: Jumping on trampoline and left ankle gave out.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 1:34 pm
What time did they arrive?: 1:39 pm

~~**IF NO PARAMEDICS**~~
~~**How is guest getting home? (Circle One):** Relative Friend Public Transport~~
~~**Name of Person providing transport:** **Tel:**~~

COMMENTS:

- Reviewed footage - did not appear to trip, stumble, or slip. Left ankle just appeared to give out while jumping near yellow pad. RB
- Ice given
- refunds may be needed. Group purchased for two hours but only able to jump for one. Unsure of group size.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg H COURT: Main
Employees present: Alissa
Waiver Attached (Circle one): YES or NO

Date of Injury: 4 / 29 / 11
Time: 12:45

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Black shorts, white Shirt
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: Mother
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Jumping on main court. Hit knee to lip when he over-rotated.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given
- Four one hour jump passes given. was with friends when incident happened.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Dodgeball
Employees present:
Waiver Attached (Circle one): YES or NO

Date of injury: 4 / 30 / 11
Time: 2:30

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Shorts, No Shoes
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child:_____ Relationship:_____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Landed on her bad ankle Awkwardly after jumping on dodgeball. going to hospital after with friends. Has had previous ankle problems

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- going to hospital after friends finish jumping
- Barefoot, Athletic Clothing
- seemed to be in Considerable pain
- previous Ankle Injuries

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg H, Vedar COURT:
Employees present: Lucas, Kalyn
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 1 / 11
Time: 1:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: gray shirt, shorts (no shoes)
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mom
Phone Number: (Home) (Cell) above

HOW IT HAPPENED: Jumping on main court and her friend accidently double bounced eachother, making her ankle roll (right).

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:
- gave ice
- requested water
- swelling around her ankle

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan COURT: Foam
Employees present: Christy
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 3 / 11
Time: 9:03

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Red Shirt, Blue Shorts Shoes
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping into foam pit, slipped and launched from front edge of front trampoline. Right shin broken. Could have tripped at edge of foam pit on yellow pad.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 9:04
What time did they arrive?: 9:07

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- Ice given
- no water
- parents meeting him at Overlake Hospital
- trying double front flips.
- in good spirits

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 6 / 2011
Time: 5:32 p

Name of Guest: [redacted] w/ Ophelia Bdaly
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Pink top & jeans – no shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:** Aunt
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumped off wall – when landing rolled ankle (L)

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

~~Mom~~ Aunt is here now – going home w/ her
Swelling in ankle
Ice given & stuffed animal

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran COURT: foam
Employees present: John B
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 8 / 11
Time: [redacted] 5:54

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: white t-shirt (shoes on)
Address:
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Attempted a flip in foam pit and hit his knee on the chin. Might need stickes on the cut.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- going to the hospital
- in a [redacted] hurry to leave
- coming back on 5/9/11 for dodge ball tourney

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan **COURT:** Main
Employees present: Ryan K.
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 10 / 11
Time: 9

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: White Shirt, Gray Shorts, Shoes
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor ~~Was an Adult Present~~ ?(circle one): YES OR NO
Was Child dropped off? ~~YES or NO~~ **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on trampoline, tried flip and rolled Rt ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Self, Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- Ice given.
- in good spirits.
- after resting, pain was reduced.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: COURT: Foam
Employees present: Christy Huff
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 14 / 2011
Time: 11:30 a

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: red shorts, white shirt
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Cousin
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Doing front flip into foam pit

PARAMEDICS CALLED: YES or NO (circle one)
What time: 11:30a
What time did they arrive?: 11:34a

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:
Cousin

COMMENTS:

- Disoriented – supposedly hit head no witnesses of him hitting head – only of him flipping – he's unsure of what happen
- Asked name, bday, day of week – all unresponsive so called paramedics
- Stays with Uncle: [redacted]
- Paramedics calling uncle – approved to not go w/ paramedics to hospital

~~[redacted]~~

[redacted] taking home

Waiver entered: 4/25/2010

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Ryan COURT: Main
Employees present: [redacted] Alyssa S.
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 14 / 11
Time: 6:10

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: friend of fam
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Trying to do flip and hit herself in mouth

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: Mother Tel: Above
[redacted]

COMMENTS:

- Small Cut from braces
- [redacted] Contacting parents
- [redacted] stopped by.
- may go to hospital to have cut checked out

waiver on file July 22, 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: G Forster **COURT:** Dodgeball

Employees present: Sean Donnagan

Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 14 / 11

Time: [redacted] 10:25p

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO jumped in Spokane location

What was the customer wearing: white shirt, jeans — barefoot

Address:

Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:**

Name of Adult accompanying child: **Relationship:** [redacted]

Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Reached down for ball and rolled ankle (L)

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

Ice given
Jump pass given

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran **COURT:** main
Employees present: Phil, Trevin
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 17 / 11
Time: 7:55
Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: white shirt / shorts (with shoes)
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Tried a flip on main court over the yellow pad and landed wrong. Felt a twist around his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 7:50
What time did they arrive?: 7:54

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- small swelling
- couldn't put much weight on it
- gave ice
- no previous ankle injuries.

WOF
July 8th 2010

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Ryan COURT: Main (Aerobics)
Employees present: Kyle Johnson
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 17 / 11
Time: 6:44

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: Black shirt, Black Pants, no shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Walking off red pad and rolled right ankle as she stepped on trampoline

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Self Tel:

COMMENTS:

- ice given
- no apparent swelling

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: G. Forster COURT: Main
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 18 / 2011
Time: 2:05 p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: Black Shirt & Shorts - Barefoot
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumped off wall to do a flip overrotated landing and bent pinky (R) hand backward ~~after~~ during fall

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Driving SELF Tel:_____

COMMENTS:

- Swelling
- Ice given
- In good spirits

waiver on file : Jan 7, 2010

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan COURT: Main
Employees present:
Waiver Attached (Circle one) YES or NO

Date of injury: 5 / 20 / 11
Time: 5:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) YES or NO
What was the customer wearing: Orange shirt, blue shorts, shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: friend of family
Phone Number: (Home) [redacted] (Cell)

HOW IT HAPPENED: Jumping on main court, tried backflip and hit knee to eye.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given
- [redacted] in good spirits
- Swollen "black" eye.

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh
COURT: Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of injury: 5 / 20 / 11
Time: 11:45 pm

Name of Guest: [redacted]
First Time Jumper (Circle one): YES or (NO)
DOB: [redacted]
What was the customer wearing: Shorts, Low top shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Caught heel on pad and Rolled. says he felt pop. Ankle felt tender. Ice given.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:
- Rolled ankle on pad - Shorts, Low top shoes
- says he felt [redacted] pop
- Ankle felt tender
- walked off court by himself

FTK 5/20/11

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: Form
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 20 / 11
Time: 10:25 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: Black Shorts / Black Shirt / Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR (NO)
Was Child dropped off? (YES) or NO If Yes by whom?: friends
Name of Adult accompanying child: [redacted] Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Attempted Double Back Flip, Landed on yellow pad with neck. Felt Crack in Sternum & right arm went tingly. Feeling Bloated, Dizzy

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 10:20
What time did they arrive?: 10:25

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

- Athletic Clothing
- Barefoot
- Ice given
- 911 called
- Parents called (Minor)
- Taken to hospital
- Landed on neck on pad while attempting Double Flip.
- Felt Crack in Sternum
- Right arm went tingly
- Feeling bloated/Dizzy

F.T.K 5/20/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: main
Employees present: Brandon H
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 21 / 11
Time: 3:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: Shorts / tank top / Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Friends mom
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Rolled foot over tumble track. Ice given. Pain in arch of foot

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Robin Murphy Tel:

COMMENTS:

- parents called
- ICE given
- May go to hospital later
- Barefoot
- Rolled foot over tumble track
- pain in arch of foot

FTK 5/21/11

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Main
Employees present: Brandon H.
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 21 / 11
Time: 2:25 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: Red Jumpsuit / Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Rolled ankle on pad by tumble track. swelling.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: himself **Tel:** same

COMMENTS:

- Rolled ankle on pad
- Ice given
- swelling
- previous ankle trouble
- signed Refusal waiver

FTK
5/21/11

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 21 / 11
Time: 1:55 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: Shorts, Shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: parents
Phone Number: (Home) same (Cell)

HOW IT HAPPENED: Jumping on main court. Rolled ankle on yellow pad. Came here for BDAY :). Ice given, some swelling.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Rolled ankle on pad
- Ice given
- Swelling
- Shorts, Shoes

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran COURT: foam
Employees present: Evan
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 21 / 11
Time: 6:40

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) (Cell) above

HOW IT HAPPENED: After jumping in the foam pit, another jumper's leg landed on [redacted] head. The other customer jumped off the side tramp.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:
- gave ice
- felt dizzy

WOF: May 24th 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: JOSH COURT: Main
Employees present: Janelle B
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 21 / 11
Time: 1:40 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: dress, Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) same (Cell)

HOW IT HAPPENED: Rolled ankle on pad on Main Court. Ice given

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Barefoot
- Rolled ankle on pad
- no Medical attention
- Mother signed Refusal all paper
- Ice given

FTK
5/21/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: JOSH **COURT:** Mark
Employees present: Janelle B
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 21 / 11
Time: 11:40 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: dress, Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO [redacted] **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** mother
Phone Number: (Home) same **(Cell)**

HOW IT HAPPENED: Rolled ankle on pad on main Court. Ice given

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

- Barefoot
- Rolled ankle on pad
- no Medical attention
- Mother signed Refusal 911 paper
- Ice given

FTK
5/21/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Dodgeball
Employees present: Brandon H.
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 25 / 11
Time: 1:00 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Jeans / Shirt / Shoes
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child:_____ Relationship:_____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Playing Dodgeball and slipped and fell on finger. previous finger injuries. felt Dizzy early on but feels fine after sitting down. ice given

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Himself Tel: same as above

COMMENTS:

- Landed on finger on Dodgeball court
- Ice given
- ~~[illegible]~~ previous finger trouble
- Felt Dizzy but fine after sitting down

FTK 5/25/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vegran COURT: Pvt
Employee present: ~~[illegible]~~ Jarell
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 25 / 11
Time: 7:13

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Him and another jumper landed on the same trampoline and James rolled his left ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:
- Pain level 5
- gave ice
- rolled ankle before

WOF! Dec 1st 2009

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran **COURT:**
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 26 / 11
Time: 5:50

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: black shirt, black shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Doing a backflip off the wall and as he landed his foot twisted under the yellow pad.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 5:55
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:
- rolled same ankle before (right)
- gave ice

WOF: July 1st 2010

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran **COURT:**
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 26 / 11
Time: 7:15

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: Jumping on main court and just landed wrong twisting his ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:**

COMMENTS:

- gave ice
- some swelling
- broke his other ankle before

WOF: May 2nd 2011

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** main
Employees present: Andrew walt
Waiver Attached (Circle one): YES or (NO)

Date of Injury: 5 / 27 / 2011
Time: 8:00 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? (YES) or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: [redacted] **Relationship:** Family Friend
Phone Number: (Home) [redacted] **(Cell)**

HOW IT HAPPENED: front somersalt. one leg landed on the other. outside of leg hurts. feels throbbing. Left Message for parents. 911 refusal waiver signed by [redacted] ice given. Helped out to car.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport [redacted] **Tel** [redacted]

COMMENTS:

- one leg landed on the other
- outside of leg hurts
- feels throbbing
- Left Message for parents
- 911 refusal waiver signed by [redacted]
- ice given
- helped out to car.

FTK 5/27/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5/27/11
Time: 8:30 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Shorts, Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Friend
Phone Number: (Home) [redacted] **(Cell)** [redacted]

HOW IT HAPPENED: Attempted Flip on Main Court and Landed with his face on his knee, knocking out a few teeth. Says pain is 4 on 1-10. Parents called by John Gruber (Group Leader), will likely seek Dentist ASAP. Ice given. 911 Refusal waiver signed

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** Same

COMMENTS:

- Attempted Flip on Main Court
- knee hit Mouth, knocked 2 teeth out
- ice given
- Parents called by group leader [redacted]
- will likely seek Dentist ASAP
- 911 refusal waiver signed

FTK 5/27/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: Main
Employees present: Kalyn
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 5 / 28 / 11
Time: 4:00 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Attempted flip and landed wrong on pad. (ankle) said he felt it twist. 911 Refusal waiver signed. Ice given.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:
- Attempted flip and landed awkwardly on pad.
- said he felt it twist (ankle)
- 911 Refusal waiver signed
- ice given
- Friend giving transportation

FTK 5/28/11

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg H COURT: Main
Employees present: Collen
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 29 / 11
Time:

Name of Guest: [redacted]
DOB:
First Time Jumper (Circle one): YES or NO
What was the customer wearing: Blue Pants, Flame Shirt
Address: [redacted]
Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Father
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Jumping on main court. Jumped into the wall and hurt shoulder (Left).

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:
- Ice given
- Previous shoulder Injury

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Mark
Employees present: Matthias
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 29 / 11
Time: 9:00 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Shorts, Shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: Friend [redacted]
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Landed on edge of pad and rolled ankle. Says it is sprained. Hurt it a long time ago. Ice given. Ankle Elevated. All Refusal waiver signed. Left Message for parents.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Landed wrong on pad (Ankle)
- Says it sprained
- Previous ankle injury
- Ice given, Ankle elevated
- All Refusal signed
- Left message for parents.

FTK
5/29/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Main Court
Employees present: Phil
Waiver Attached (Circle one) YES or NO

Date of Injury: 5 / 30 / 11
Time: 4:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Mother
Phone Number: (Home) same (Cell)

HOW IT HAPPENED: Attempted somersault and hit head on pad. Initially said it hurt a little bit but said he felt fine upon leaving. Jumper is autistic.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: same

COMMENTS:
- hit head on pad
- hurt at first, better upon leaving
- 911 Refusal waiver signed
- Jumper is Autistic

FTK 5/30/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Dodgeball
Employees present: Billy M. Josh G
Waiver Attached (Circle one) YES or NO

Date of Injury: 5 / 30 / 11
Time: 11:35 AM

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Barefoot / Shorts
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Landed on pad on Dodgeball. (Ankle) - Leg says front of leg and ankle hurts. Some swelling. Ice given

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend [redacted]
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:
- Landed awkwardly on ankle on pad
- Pain in front of leg/high ankle
- Ice given
- Parents called
- 911 refusal signed

FTK 5/30/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Main
Employees present: Brandon H
Waiver Attached (Circle one): YES or (NO)

Date of Injury: 5 / 30 / 11
Time: 3:15

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: [redacted]
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:** [redacted]
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) [redacted] **(Cell)** [redacted]

HOW IT HAPPENED: Jumping on main court and had foot stepped on by Adult Jumper. Ice given. Seems to be in some pain. Crying.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport
Name of Person providing transport: [redacted]

COMMENTS:

- got foot landed on by Adult Jumper
- Ice given
- Seems to be in some pain
- 911 refusal waiver signed by mother

FTK
5/30/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Main
Employees present: Brandon H
Waiver Attached (Circle one): YES or NO

Date of Injury: 5 / 31 / 11
Time: 8:45 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Shorts / Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Regular Jumping, Ankle gave out. Some swelling.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Himself Tel: same

COMMENTS:
- Ankle gave out
- Ice given
- some swelling
- 911 Refusal signed

FTK 5/31/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Gregory F. **COURT:** Main
Employees present: Dan [illegible]
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 3 / 2011
Time: 7:40 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black Hoodie, black Shorts – ~~[illegible]~~ No Shoes
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumping, did backflip and landed awkwardly on Ankle (L) next to yellow pads

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- Ice Given
- just got here – pass given (2)
- has rolled same Ankle previously
- Spoke w/ mother [redacted]
→ found mother taking him home
– felt ok enough to try jumping again after 45 min of rest & ice
– In good spirits

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SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg H **COURT:** Main
Employees present: B. Lin
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 4 / 11
Time: 12:15

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or NO
What was the customer wearing: Plaid shorts white shirt
Address: [redacted]
Phone Number: (Home)_____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**_____
Name of Adult accompanying child:_____ **Relationship:**_____
Phone Number: (Home)_____ **(Cell)**_____

HOW IT HAPPENED: playing Dodge Ball ~~left~~ when he called left ankle

PARAMEDICS CALLED: YES or NO (circle one)
What time:_____
What time did they arrive?:_____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport:_____ **Tel:**_____

COMMENTS:

- Ice given
- Minor swelling
- Customer in good spirits

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg Forster **COURT:** main
Employees present: Clara Cooper
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 4 / 2011
Time: 3:45 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: flower pants, green shirt — shoes
Address:
Phone Number: (Home) **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:** Mom — [redacted]
Name of Adult accompanying child: **Relationship:**
Phone Number: (Home) **(Cell)**

HOW IT HAPPENED: jumping on main landed on red pad — knee hit mouth —

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Relative) Friend Public Transport
Name of Person providing transport: **Tel:**

COMMENTS:

- front teeth are bleeding a little
- ice given
- pain level 6 of 10
- parent here comforting her
- feels like tooth shifted — going to see dentist
- jump pass given

* waiver on file 12/12/2010 #1287259

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** main
Employees present: Colleen Smith
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 4 / 2011
Time: 4:50 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Blue Shorts, Dark blue shirt — shoes on
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted]
Name of Adult accompanying child: _____ **Relationship:** friend
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: twisted ankle landing from wall jump

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- Ice and pass given
- not much swelling — starting to hurt more after 30 min
- Going home w/ friend [redacted]
- In good spirits

INJURY REPORT

Location (circle one): SJC SAG SEA CON OCY
MOD: Greg H COURT: Main
Employees present: Christy H
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 5 / 11
Time: 2:30

McSweeny

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: Mother
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main court. Tripped on the yellow pad.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given
- Jump pass given (1)

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh **COURT:** Mah
Employees present: Travis, Brandon H, Christy
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 7 / 11
Time: 12:20

Name of Guest: [redacted]
DOB: _____ **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: Barefoot, Capris
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or (NO) **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** teacher
Phone Number: (Home) [redacted] **(Cell)** _____

HOW IT HAPPENED: Jumping on main court and hit knee to her mouth causing her lip to split and bleed.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: Bus school **Tel:** [redacted]

COMMENTS:

- split lip after hitting with knee
- swelling to lip
- ice given
- 911 refusal waiver signed

FTK 6/7/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT:
Employees present: Surelle, Matthias
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 8 / 11
Time: 8:56
[redacted]
Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Trying to do a back flip on main and landed virtually on his neck.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 8:51
What time did they arrive?: 8:56

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]
(friend w/ him)

COMMENTS:

- body/neck feels numb
- hands feel hot
- didn't move him
- couldn't feel anything when paramedics were touching him
- heard a snap when landed
- has a headache
- 10 min in started getting pain down his arm

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Main
Employees present: Phil D.
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 8 / 11
Time: 4:00 pm

Name of Guest: [redacted]
DOB: _____ First Time Jumper (Circle one): YES or NO
What was the customer wearing: _____
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) _____

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: Mother
Name of Adult accompanying child: _____ Relationship: Mother
Phone Number: (Home) Same (Cell) _____

HOW IT HAPPENED: Attempted back flip off wall and landed awkwardly and knee gave out. Ice given. was able to limp off court.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Mother Tel: Same

COMMENTS:

- Landed wrong and knee gave out
- ice given
- 911 Refusal signed
- contacted mother

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran **COURT:** main
Employees present: David
Waiver Attached (Circle one): YES or (NO)

Date of Injury: 6 / 9 / 11
Time: 8:20

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or (NO)
What was the customer wearing: black shirt, jeans w/ shoes
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumping on main and attempted a back flip. As he landed, he hit the yellow pad.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- pain level is same.
- swelling around the ankle
- hears popping in his ankle when moving around
- gave ice

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Greg H COURT: Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 10 / 11
Time: 4:30 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: Blue jeans, Black Shirt
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumped off the wall onto the lower trampoline, then onto another trampoline then rolled left ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): (Mother) Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given
- Mother taking her to good Sam hospital to be checked out.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh COURT: Marin
Employees present: Coleen smith
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 11 / 11
Time: 8:25 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing:
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) same (Cell)

HOW IT HAPPENED: Attempted front flip on main court and hit knee to eye socket area.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Knee to eye area after flip
- ice given
- 911 refusal signed
- Looks to be o.k.

FTK 6/11/11

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Greyt **COURT:** Main
Employees present: Kylan
Waiver Attached (Circle one): YES or NO

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Date of Injury: 6 / 12 / 11
Time: 1:30pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Jeans, Black Shirt
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: [redacted] **Relationship:** Mother
Phone Number: (Home) _____ **(Cell)** [redacted]

HOW IT HAPPENED: Jumping on main court. Rolled ~~left~~ Right ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time: 1:51 pm
What time did they arrive?: 1:58

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- Ice given
- Taking Child to Overlake

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedan COURT: Main
Employees present:
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 15 / 11
Time: 8:15

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: white/black shirt, black shorts (with shoes)
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]
MOM: [redacted]
If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumped off the side trampoline and skipped one section [redacted] but as he landed he twisted his knee. Knee looks dislocated.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 9:16
What time did they arrive?: 9:23

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

- gave ice
- didn't move him
- no water

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: Main
Employees present: Janelle
Waiver Attached (Circle one): YES or NO

Waiver entered May 24, 2010

Date of Injury: 6 / 15 / 11
Time: 6:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: white top, pink shorts, shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: [redacted]
Phone Number: (Home) [redacted] (Cell)

HOW IT HAPPENED: Jumping on main court and got double-bounced by adult jumper, rolled right ankle.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] Tel:

COMMENTS:

- Ice given
- cash refund given ($12.00)

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran COURT: main
Employees present: Lara, Micheal
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 19 / 11
Time: 2:46

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: green shirt, jeans (no shoes)
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted] [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO (wife)
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumping on main court and as he landed on the trampoline his left knee gave out. Thinks he heard a pop.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 2:48
What time did they arrive?: 2:53

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:
- lots of pain
- previous injury 20 years ago
- gave ice

FTK

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. **COURT:** Foam
Employees present: Monica Nav
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 24 / 2011
Time: 1055 p

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Black shirt, jeans - no shoes
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)** [redacted] - Father)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** [redacted] - father
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: jumped or into foam and hit knee to bottom lip.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** _____

COMMENTS:

- Bloody lip - might need stitches
- Ice given - biohazard clean up
- No parent present, w/ friends
- pass given - calling father about incident

Date of waiver entry: 6/24/2011 #58916

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Vedran COURT: main

Employees present: Michael

Waiver Attached (Circle one): YES or NO

Oct 2, 2009

Date of Injury: 10 / 25 / 11

Time: 10:36

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or (NO)

What was the customer wearing: purple tank top, black pants

Address:

Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: Relationship:

Phone Number: (Home) (Cell)

HOW IT HAPPENED: Jumping on main court and landed wrong which led to rolling her right ankle.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- gave ice
- no swelling
- recurring ankle problem (8 times rolled)

Jan. 9th 2011

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Greg H. COURT: Main

Employees present: Mcneal, Colleen

Waiver Attached (Circle one): ~~YES or~~ NO

Date of Injury: 6 / 25 / 11

Time: 6:39

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: black shirt, blue shorts (with shows)

Address: [redacted]

Phone Number: (Home) [redacted] (Cell) [redacted] (mother)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: [redacted]

Name of Adult accompanying child: [redacted] Relationship: friend

Phone Number: (Home) [redacted] (Cell) [redacted]

HOW IT HAPPENED: Jumping on mini and attempted to jump off the wall but landed wrong. He blacked out for about 10 sec. and didn't remember what happend.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: _____ Tel: _____

COMMENTS:

- Pain on his tail bone
- gave ice
- Parent accompanying [redacted] called his mother.
- Will be driving him home and consult a nurse

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Josh COURT: foam pit

Employees present:

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 6 / 25 / 11

Time: 11:45 AM

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): (YES) or NO

What was the customer wearing: Shorts, Shoes

Address: [redacted]

Phone Number: (Home)_____ (Cell)_____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: [redacted] Relationship: Mother

Phone Number: (Home) [redacted] (Cell)_____

HOW IT HAPPENED: tripped on pad on foam pit and hurt his wrist while breaking the fall.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] (Relative) Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- ICE given
- pain was 6 on 1-10
- Mother was present and notified
- 911 Refusal signed

FTK 6/25/11

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Josh **COURT:** Main

Employees present: IMFA

Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 28 / 11

Time: 5:00pm

Name of Guest: [redacted]

DOB: [redacted] **First Time Jumper (Circle one):** YES or NO

What was the customer wearing: Athletic Clothing

Address: [redacted]

Phone Number: (Home) [redacted] **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO **If Yes by whom?:** _____

Name of Adult accompanying child: [redacted] **Relationship:** Mother

Phone Number: (Home) same **(Cell)** same

HOW IT HAPPENED: Attempted flip and landed on head, hurting neck. Said he felt pop. Parents said they do not want 911 and will take him to hospital.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- ice given
- 911 refusal signed
- taking [redacted] to hospital for x-rays

FTK 6/28/11 JS

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: main
Employees present: Rafael
Waiver Attached (Circle one): YES or NO

Date of Injury: 6 / 29 / 11
Time: 9:54

Name of Guest: [redacted] ([redacted])
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: green shirt, shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]
mom: [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Did a back flip and landed on his back on red pad. [redacted]

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:
- Previous injury 8th month ago
- Broke ribs, and other bones
- Felt small pain when breathing
-

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Josh COURT: PVT

Employee present: Kelyn B

Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 / 1 / 11

Time: 11:00pm

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): (YES) or NO

What was the customer wearing: Jeans, tennis shoes

Address: [redacted]

Phone Number: (Home)_____ (Cell)_____

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child:_____ Relationship:_____

Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Playing dodgeball on PVT court and was standing red pad and rolled ankle while trying to catch ball.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:_____

What time did they arrive?:_____

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: Herself Tel:_____

COMMENTS:

- swelling
- ice given
- good spirits
- All Refusal signed

FTK 7/1/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: JOSH **COURT:** Main
Employees present: ONANA
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 / 5 / 11
Time: 7:20 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** (YES) or NO
What was the customer wearing: _____
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Jumped into same square as friend and may have hyper extended knee upon landing.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- moderate pain
- Ice given
- 911 refusal signed
- Riding home w/friends
- may see dr. but "probably not"

FTK
7/5/11

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. COURT: Frank
Employees present: Ashley Hirsch
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 8 / 2011
Time: 4:45p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: tank top, shorts - bare feet
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: jumped in air felt back pop and then have pop out

PARAMEDICS CALLED: YES or NO (circle one) declined
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: self Tel:

COMMENTS:

- Ice given
- In Good Spirits
- Got out of foam pit by themself
- pain level 0 1 sitting - 3 when moving
- refused medical Attention & signed medical Care refusal form

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Greg F. COURT:
Employees present: David Morgan
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 9 / 2011
Time: 540p

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Purple Top + Shorts - barefoot
Address: [redacted]
Phone Number: (Home) (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO N/A
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Rolled ankle (L) landed on yellow Pad

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Self Tel:

COMMENTS:

- Ice given
- Swelling
- Refund given
- moderate pain

Date: May 5, 2010 #582133

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedan COURT: foam Pit
Employees present:
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 10 / 11
Time: 4:55

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: blue shirt, shorts
Address:
Phone Number: (Home) (Cell) [redacted] (friend's mom)

If Minor Was an Adult Present ?(circle one): YES OR (NO) [redacted]
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Attempted a double front flip and hit his bottom lip against his knee.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): [redacted] Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- gave ice
- called parents he's staying with (on vacation)
- might need stiches, cut on his lip is deep.
- Doesn't remember what happend.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Great COURT: Main

Employees present:

Waiver Attached (Circle one): YES or NO Searching for waiver

NOE March 7 2010

Date of Injury: 7/11/11

Time: 12:10

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Black Shorts Grey Shirt

Address: [redacted]

Phone Number: (Home) (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: [redacted] Relationship: Relative

Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Jumping on main court. Landed wrong a twisted his back.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given
- Child was more scared. As soon as dad arrived composure changed ten fold. Got up and walked and continued to jump.

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran COURT: foam
Employees present: Rahul
Waiver Attached (Circle one): YES or NO

Date of injury: 7 / 13 / 11
Time: 7:20

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: black shirt / shorts
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted] (mom)
[redacted] (dad)

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Attempted a back flip and his knee hit his nose.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:

- gave ice
- looks swollen / bruised
- called parents [redacted]
- spoke w/ his dad, going to see a doctor

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Gregg COURT: Main

Employees present:

Waiver Attached (Circle one): YES or NO

FD

Date of Injury: 7 / 15 / 11

Time: 5:00pm

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Pink shirt pink shirt

Address: [redacted]

Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?: _____

Name of Adult accompanying child: [redacted] Relationship: Mother

Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Jumping on main. Double bounced by another customer. Hurt right leg.

PARAMEDICS CALLED: YES or NO (circle one)

What time: _____

What time did they arrive?: _____

IF NO PARAMEDICS

How is guest getting home? (Circle One): [redacted] Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given
- able to wiggle toes

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY

MOD: Grey H. COURT: Foam

Employee present:

Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 16 / 11

Time: 12:26

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or NO

What was the customer wearing: Blue Shirt, Black Shorts, no shoes

Address: [redacted]

Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR NO

Was Child dropped off? YES or NO If Yes by whom?:

Name of Adult accompanying child: [redacted] Relationship: Father

Phone Number: (Home) Same (Cell)

HOW IT HAPPENED: Jumping into foam and hit knee to face.

PARAMEDICS CALLED: YES or NO (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): Relative Friend Public Transport

Name of Person providing transport: [redacted] Tel: Above

COMMENTS:

Slight swelling around nose.
Ice given
~~[illegible]~~
Left before second check-up.

RS

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedcan COURT: foam
Employees present: Kristin
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 / 17 / 11
Time: 2:05

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or (NO)
What was the customer wearing: blue shirt, dark blue shorts
Address:
Phone Number: (Home) (Cell) [redacted]4

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: friend's mother
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Attempted a front 360° spin move and as he landed [redacted] he felt his neck hurting. Felt like he cracked it.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: above

COMMENTS:
- Felt dizzy after
- Neck was hurting.
- Upper back feels sore
- Friend called his parents

7/17

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Vedran **COURT:** Foam
Employee present: David
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 20 / 11
Time: 12:20

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: black shirt, shorts
Address: [redacted]
Phone Number: (Home) _____ **(Cell)** [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:** _____
Name of Adult accompanying child: _____ **Relationship:** _____
Phone Number: (Home) _____ **(Cell)** _____

HOW IT HAPPENED: Attempted a double front flip and his face hit his knee. Got a swollen lip / cut inside.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ **Tel:** _____

COMMENTS:

- gave ice
- feels fine

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Josh **COURT:** Main Court
Employee present: Margaret
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 20 / 11
Time: 7:00 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Athletic Clothing, Shoes
Address: [redacted]
Phone Number: (Home) 425-387-2297 **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Ther
Phone Number: (Home) same **(Cell)**

HOW IT HAPPENED: Landed on red pad on back. In some pain. Possibly knocked wind out.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** same

COMMENTS:

- ice given
- 911 refusal signed
- Asked twice for medical attention (Josh Asked)
- Free Jump passes given.

F.T.K. 7/20/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Josh COURT: Man
Employees present: ONANA
Waiver Attached (Circle one) (YES) or NO

Date of Injury: 7 / 21 / 11
Time: 2:10 pm

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one) (YES) or NO
What was the customer wearing: Athletic Clothing / Shoes
Address: [redacted]
Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): YES OR (NO) Came w/ friends
Was Child dropped off? YES or (NO) If Yes by whom?:
Name of Adult accompanying child: Relationship:
Phone Number: (Home) (Cell)

HOW IT HAPPENED: Leg Bent in while Landing on opposing trampoline. Hurt Ankle. Swelling up. Says he felt a snap or pop.

PARAMEDICS CALLED: YES or (NO) (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative (Friend) Public Transport
Name of Person providing transport: [redacted] Tel: [redacted]

COMMENTS:

- Ice given - called mom on phone to notify
- swelling
- crutches
- all refusal signed

FTK 7/21/11

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY

MOD: Josh COURT: Main

Employees present: Darren, Josh

Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 22 / 11

Time: 800 pm

Name of Guest: [redacted]

DOB: [redacted] First Time Jumper (Circle one): YES or (NO)

What was the customer wearing:

Address: [redacted]

Phone Number: (Home) [redacted] (Cell)

If Minor Was an Adult Present ?(circle one): (YES) OR NO

Was Child dropped off? YES or (NO) If Yes by whom?:

Name of Adult accompanying child: [redacted] Relationship: Stepfather

Phone Number: (Home) Same as above (Cell)

HOW IT HAPPENED: Jumping on main court and seemed to land under knee, hurting knee. Possible hyperextension.

PARAMEDICS CALLED: YES or (NO) (circle one)

What time:

What time did they arrive?:

IF NO PARAMEDICS

How is guest getting home? (Circle One): (Relative) Friend Public Transport

Name of Person providing transport: [redacted] Tel: Same as above

COMMENTS:

- ICE given
- Seemed to be in some pain
- Stepfather and grandmother were there and notified
- 911 refusal signed

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: [redacted] Josh **COURT:** Foam pit
Employees present: Riley
Waiver Attached (Circle one): YES or NO

Date of Injury: 7/25/11
Time: 6:00 pm

Name of Guest: [redacted]
DOB: [redacted] **First Time Jumper (Circle one):** YES or NO
What was the customer wearing: Athletic Clothing / Barefoot
Address: [redacted]
Phone Number: (Home) [redacted] **(Cell)**

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO **If Yes by whom?:**
Name of Adult accompanying child: [redacted] **Relationship:** Aunt
Phone Number: (Home) **(Cell)** [redacted]

HOW IT HAPPENED: Hit knee to head while Jumping in to foam pit. Bruised forehead.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: [redacted] **Tel:** [redacted]

COMMENTS:

- Ice given
- Bruised forehead
- Felt a little Dizzy but felt fine after a minute
- 911 Refusal signed by [redacted]
- Left message with [redacted]

F.T.K.
7/25/11

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan COURT: Main
Employees present: Billy
Waiver Attached (Circle one) YES or NO

Date of Injury: 7 / 26 / 11
Time: 8:50

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Brown Shorts, black shirt, no shoes
Address: [redacted]
Phone Number: (Home)_____ (Cell) [redacted]

If Minor ~~Was an Adult Present~~ ?(circle one): YES OR NO
Was Child dropped off? ~~YES or NO~~ If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home)_____ (Cell)_____

HOW IT HAPPENED: Jumping on main, tried a backflip and landed on head

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Self Tel: _____

COMMENTS:

- Says neck is sore
- Ice given
- In good spirits
- 9:41pm: Did not jump anymore but is feeling less sore.
- refunded jumptime

RQ

INJURY REPORT

Location (circle one): SJC SAC SEA CON OCY
MOD: Ryan COURT: Dodgeball
Employee present: Nicole
Waiver Attached (Circle one): YES or NO

Date of Injury: 7 / 30 / 11
Time: 5:00

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): YES or NO
What was the customer wearing: Red shirt, blue shorts, no shoes
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: _____ Relationship: _____
Phone Number: (Home) _____ (Cell) _____

HOW IT HAPPENED: Jumping on dodgeball, threw ball and put all weight on Rt foot on called it.

PARAMEDICS CALLED: YES or NO (circle one)
What time: _____
What time did they arrive?: _____

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Father ([redacted]) Tel: _____

COMMENTS:

- Ice given
- Father called

INJURY REPORT

Location (circle one): SJC SAC (SEA) CON OCY
MOD: Vedran COURT: main
Employee present: Darren
Waiver Attached (Circle one): (YES) or NO

Date of Injury: 7 / 30 / 11
Time: 10:20

Name of Guest: [redacted]
DOB: [redacted] First Time Jumper (Circle one): (YES) or NO
What was the customer wearing: blue shirt, shorts (no shoes)
Address: [redacted]
Phone Number: (Home) _____ (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): (YES) OR NO
Was Child dropped off? YES or NO If Yes by whom?: _____
Name of Adult accompanying child: [redacted] Relationship: friend's dad
Phone Number: (Home) _____ (Cell) [redacted]

HOW IT HAPPENED: Tried to flip on main and as he landed his foot rolled. Felt like he landed half way on yellow and half on trampoline.

PARAMEDICS CALLED: (YES) or NO (circle one)
What time: 10:30
What time did they arrive?: 10:35

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: _____ Tel: _____

COMMENTS:
- gave ice
- Friend's mom gave him ibuprofin
- Visiting from Sacramento, and staying w/ friend
- Taking him to the hospital

April 13th 2011

INJURY REPORT

SKY HIGH SPORTS
THE TRAMPOLINE PLACE

Location (circle one): SJC SAC SEA CON OCY
MOD:
COURT: Main
Employees present:
Waiver Attached (Circle one) YES or NO

Date of Injury: 2 / 26 / 11
Time: ~~10:30~~ 10:15

Name of Guest: [redacted]
DOB: [redacted]
First Time Jumper (Circle one): YES or NO
What was the customer wearing: Black Shirt, Khaki Shorts
Address: [redacted]
Phone Number: (Home) [redacted] (Cell) [redacted]

If Minor Was an Adult Present ?(circle one): YES OR NO
Was Child dropped off? YES or NO [redacted] If Yes by whom?:
Name of Adult accompanying child: [redacted] Relationship: mother
Phone Number: (Home) (Cell) [redacted]

HOW IT HAPPENED: Jumping on main court. Doing a flip and twisted his back.

PARAMEDICS CALLED: YES or NO (circle one)
What time:
What time did they arrive?:

IF NO PARAMEDICS
How is guest getting home? (Circle One): Relative Friend Public Transport
Name of Person providing transport: Tel:

COMMENTS:

Called in on 2/31/11 to do this report. Hurt his back. went to valley med to get checked out. Compression fracture.