

# SYNERGY PAINTBALL CHALLENGE LLC

## Players 10 To 18 Years Old Use This Form.

### Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement")

In consideration of participating in the **Paintball Games**, I represent that I understand the mature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which maybe caused by my own actions, or inactions, those of participating in the event, the conditions in which the event takes place, or the negligence of the "Releases" named below: and that there maybe other risks either not known to me or not readily foreseeable at this time; And I fully accept and assume all such risks and all responsibility for losses, cost, and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue **SYNERGY PAITNBALL CHALLENGE LLC**, it's respective administrators, directors, agents, officers, volunteers, and employees, other participants, and Sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "**Releases**" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "Releases" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this **Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement**, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extend allowed by law and agree that if any portion of this agreement is held to be invalid the balance, not withstanding, shall continue tin full force and effect.

Date: \_\_\_\_\_

Printed name of participant \_\_\_\_\_ Signature of participant \_\_\_\_\_

**And I**, the minor's parent and/ or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue and **Agree to Indemnify and Save and Hold Harmless** each of the Releases from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releases or otherwise, including negligent rescue operations, and further agree that if, despite this release, I the minor, or anyone on the minor's behalf makes a claim against any of the above Releases, **I Will Indemnify, Save And Hold Harmless** each of the Releases form any litigation expense, attorney fees, loss, liability, damage, or any cost any Release may incur as the result of any such claim.

Date: \_\_\_\_\_

Signed, sealed and delivered in my presence this  
\_\_\_\_\_ day of \_\_\_\_\_, 200\_\_.

Printed name or Parent/Legal Guardian: \_\_\_\_\_

Signature of Parent/Legal Guardian: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

Player number: \_\_\_\_\_

Emergency telephone number: \_\_\_\_\_

Emergency contact: \_\_\_\_\_

**Player Information**

New

Update

**PLEASE PRINT CLEARLY**

Name: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Rental Agreement**

Check items you want to rent

Marker Number: \_\_\_\_\_

Tank Number: \_\_\_\_\_

Mask Number: \_\_\_\_\_

Twin Pod Number: \_\_\_\_\_

Other: \_\_\_\_\_

I agree that I am fully responsible for all equipment that I rent and I will return the equipment in the same condition as I received it or I will pay for any damages unless insured. I also understand that all rental guns are issued with barrel covers and if lost I must pay a replacement fee of \$5.00

Band Number: \_\_\_\_\_

Signature: \_\_\_\_\_