

# Release of Liability

IN CONSIDERATION of being permitted to participate in any way in the sport and activity of paintball, I acknowledge, appreciate, and agree that:

1. The risk of injury from the activity and weaponry involved in paintball is significant, including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk of serious injury does exist;
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE of those persons released from liability below, and assume full responsibility for my participation; and,
3. I understand that the activities of paintball are physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest official as soon as practical; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS FROM LIABILITY THE FIELD owners and Lessor of premises used to conduct the paintball activities, their officers, officials, agents and/or employees ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. I understand and agree that this Release of Liability Agreement covers each and every paintball activity and event in which I participate hereafter. I understand that at times these activities are occurring at the same time at the same location.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Additionally, I understand that as a public facility, pictures and or video may be taken by the Classic Paintball (David Holton, dba Classic Paintball, LLC) staff or others, and I grant them the right to publish, and re-publish photographic portraits or pictures of me or in which I may be included, in whole or in part.

First & Last Name:

DOB:

Address:

Phone:

Email:

Signature:

Date:

FOR PARTICIPANTS OF MINORITY AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree not only to his/her release of the Classic Paintball (David Holton, dba Classic Paintball, LLC) and all other Releases but also to release and indemnify the releases from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns, and next of kin.

Minor First & Last Name:

DOB:

Adult First & Last Name:

Address:

Phone:

Email:

Signature:

Date: