



VALHALLA AIRSOFT

INSURANCE WAIVER

I, the person detailed below, want to play Airsoft games at Valhalla Airsoft and sign this document in consideration of being given the opportunity to engage in this activity.

I understand that:-

1. The game is physically and mentally intense and may require extreme exertion to play.
2. The games may be dangerous if not played in accordance with the stated rules.
3. The possibility of injury to myself and other exists.

PLEASE COMPLETE IN CAPITAL LETTERS

NAME:

DATE OF BIRTH:

ADDRESS

POSTCODE:

TELEPHONE:

EMAIL ADDRESS:

I confirm and agree that:-

1. I am fully aware of the risks to myself and others involved in playing at Valhalla Airsoft.
2. I am physically fit and mentally able to take the strain and exertion involved in playing.
3. I will comply with Valhalla Airsoft rules and use the equipment as instructed and not so as to injure or hurt others and will obey all directions of marshals.
4. I will wear my goggles and not remove them while in the game area and may only remove goggles in the safe area. It is my own responsibility if I choose not to wear a full facemask (under 18s MUST wear a full face mask). If I do not have suitable eye protection I will not be able to take part.

I hereby release, remise and forever discharge from any claims and liabilities whatsoever without limitations that I might have against Valhalla Airsoft and the owners of property which the game is being played on.

Players under 18 must have the declaration countersigned by a parent/guardian or organiser - only after having understood the safety talk and site rules.

SIGNATURE:

DATE: