WAIVER AND RELEASE OF LIABILITY
PLEASE READ CAREFULLY

In consideration of South Sound Airsoft furnishing services and/or equipment to enable me to participate in Airsoft recreational activities, I agree as follows:

I fully understand and acknowledge that; (a) risks and dangers exist in my (or my dependents) use of Airsoft equipment and participation in Airsoft activities; (b) participation in such activities and/or use of such equipment may result in injury or illness including but not limited to bodily injury, disease, strains, fractures, partial and or total paralysis, eye injury, blindness, heat stroke, heart attack, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by negligence of the owners, employees, officers or agents of South Sound Airsoft, the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by participating in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, officers, members, agents, employees, special promoters, land owners, or suppliers of South Sound Airsoft.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify South Sound Airsoft, and its owners, agents, officers, landowners, contractors and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of Airsoft equipment or my participation in Airsoft activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers, members, contractors, employees, special promoters, landowners, or suppliers of South Sound Airsoft. I agree to be responsible for loss, theft, or damages to any South Sound Airsoft, or South Sound Airsoft equipment. I understand and agree that South Sound Airsoft is not responsible for the loss or theft of personal property, including property I have purchased from South Sound Airsoft and that it is my responsibility to properly secure my personal property.

In consideration for value received, receipt whereof is acknowledged, I hereby give South Sound Airsoft, and their photographers, the absolute right and permission to publish, copyright and use pictures (including moving pictures) of myself in which I may be included in whole or in part, composite or retouched in character or form: If the person photographed is under 18, I certify that I am his or her parent or legal guardian and I give my consent without reservation to the foregoing on his or her behalf. In consideration for value received, receipt whereof is acknowledged, I hereby give South Sound Airsoft a nonexclusive license to any and all photographic, film, or video images captured, taken, or developed from the South Sound Airsoft Location and to the use by South Sound Airsoft of the images without limitation. This document may not be modified in any form.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE SOUTH SOUND AIRSOFT, SOUTH SOUND AIRSOFT STAFF, VOLUNTEERS, SUPPLIERS, SPECIAL PROMOTERS, LANDOWNERS OR ANY OTHER SUCH PERSON FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE. This waiver expires one calendar year from date signed.

Player Signature: _____ Date of Birth: _____

Print Player Name: _____ Today's Date: _____

Email: _____ Phone: _____

Address: _____ City: _____ State: ____ ZIP: _____

Emergency Contact Name and Phone: _____

Minor Parent/Guardian Signature: _____

Print Parent/Guardian Name: _____ Phone: _____

Drivers License/ID State or Agency and Number: _____

Waiver Date M-_____ Y-_____ **ADMIN ONLY** First 3 Last Name ____--____--___

GDA ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____

Free