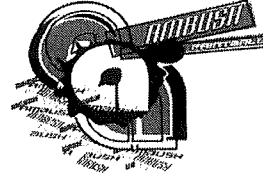


**AMBUSH PAINTBALL
 WAIVER AND RELEASE OF LIABILITY FORM
 RELEASE OF LIABILITY, WAIVE OF CLAIMS,
 ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**



BY SIGNING THIS DOCUMENT YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE

To: **AMBUSH PAINTBALL o/b Matthew & Noah Fung**
 Assumption of Risk:

- 1) I, the undersigned, wish to play Paintball. I recognize and understand that playing Paintball (hereinafter called the 'Game') involves certain risks. Those risk include, but are not limited to, the risk of injury resulting from possible malfunction of the equipment used in the game and injuries from tripping or falling over obstacles in the game playing field. In addition, I recognize that the exertion of playing the game could result in injury or death.
- 2) Despite these and other risks, and fully understanding such risks, I wish to play the Game and hereby assume the risks of playing the Game. I also hereby hold the harmless "Sponsors" and indemnify them against any or all claims, actions, suits, procedures, costs, expenses (including attorney's fees and expenses), damages and liabilities arising out of, connected with, or resulting from my playing the Game, including without limitations, those resulting from any manufacture, selection, delivery, possession, use or operation of such equipment. I hereby release the Sponsors from any and all such liability, and I understand that this release shall be binding upon my estate, my heirs, my representatives and assigns. I hereby certify to the Sponsors that I am in good health and do not suffer from a heart condition or other ailment which could be exacerbated by the exertion involved in playing the Game, I further certify that I am 18 years of age or older.

(INITIALS)

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT
 In consideration of participating in the 'Game', I hereby agree as follows:

1. **TO WAIVE ANY AND ALL CLAIMS** that I have or may in the future have against **Ambush Paintball**, their directors, officers, employees, agents, and representatives (all of whom are hereinafter collectively referred to as "the Releasees");
2. **TO RELEASE THE RELEASEES** from any and all liability for any loss, damage, injury, or expense that I may suffer or that my next of kin may suffer as a result in my participation in Paintball due to any cause whatsoever, **INCLUDING NEGLIGENCE ON THE PART OF THE RELEASEES**;
3. **TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES** from any and all liability for any damage to property of, or personal injury to, any third party, resulting from my participation in Paintball; and
4. That this Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns, in the event of my death.

I HAVE READ AND UNDERSTOOD THIS AGREEMENT, AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I AM WAIVING CERTAIN LEGAL RIGHTS WHICH I OR MY HEIRS, NEXT OF KIN, EXECUTORS, ADMINISTRATORS AND ASSIGNS MAY HAVE AGAINST THE RELEASEES.

NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

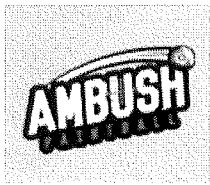
 SIGNATURE:

 X _____

EMAIL: _____ BIRTHDATE: ____/____/____

IF UNDER 18 PLEASE HAVE PARENT OR GUARDIAN SIGN THE FOLLOWING:

Parent or Guardian Name: _____ Date: _____



Ambush Paintball Covid-19 Daily Health Check

During this global Covid-19 pandemic, Ambush is committed to ensuring the health and safety of all of our staff and customers. Keeping everyone safe is our top priority and in order to do so, we ask that all players complete this daily health check questionnaire before playing.

First Name: _____ Last Name: _____

Phone Number: _____ Email: _____

Key Symptoms of Illness*	Do you have any of the following key symptoms?	CIRCLE ONE	
		YES	NO
	Fever	YES	NO
	Chills	YES	NO
	Cough or worsening of chronic cough	YES	NO
	Shortness of Breath	YES	NO
	Loss of sense of smell or taste	YES	NO
	Diarrhea	YES	NO
	Nausea and vomiting	YES	NO
International Travel	Have you returned from travel outside of Canada in the last 14 days?	YES	NO
Confirmed Contact	Are you a confirmed contact of a person confirmed to have COVID-19?	YES	NO

If you answered YES to ANY of the above questions, do NOT proceed to the rental counter.

Ambush Paintball follows the BC Provincial Health Authority guidelines very closely and urges all players to take the appropriate steps to stop the spread of this disease.

If you feel you may be at a higher risk from contracting Covid-19, Ambush strongly encourages you to practice prudent social distancing and consider whether your presence on site today is necessary.

Signature: _____ Date: _____

Parent/Guardian Signature _____ Date: _____
(if under 18 years old)