

PAINTBALL ACTION GAMES
GOPAINBALL.CA
APPLICATION, WAIVER AND RELEASE FORM

Applicant Name _____ Date of Birth _____

Address _____ Telephone _____

City _____ Province _____ Email _____

I, the undersigned wish to participate in the activities offered by this playing field and agree to the following:

I understand that:

1. That the activities are physically and mentally intense, are inherently dangerous and may require extreme exertion and that the possibility of injury to myself and others does exist.
2. The activities can be dangerous if not played by myself or others in accordance with stated rules which I have read, understand and willingly abide by.

I confirm and agree that:

1. I am fully aware of the risks that I am physically and mentally able to be fully involved in these activities and that I will comply with all the rules, regulations and the full and complete use of all equipment so as not to injure or hurt myself or other participants.

RELEASE:

I hereby release, remise and forever discharge from any and all claims and liabilities whatsoever, without limitation, that I might have against Paintball Action Games, gopaintball.ca, or MR Paintball Northern Alberta Inc. and agree to indemnify them against any and all claims, actions, suits, procedures, costs, expenses (including lawyer fees and expenses, damages and liabilities arising out of, connected with, or resulting from my participating in paintball games, including without limitation, those resulting from the manufacture, selection, delivery, possession, use, or operation of such equipment.) I hereby release Paintball Action Games, gopaintball.ca, or MR Paintball Northern Alberta Inc. 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 and Property Owners 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 participating in the hereinbefore described activity.

Assumption of Risk:

This is fully intended to be a legally binding contract. If I have any doubts concerning any aspect of its contents, I will consult a lawyer before signing it.

I state that I am 18 years of age and in good health, and intend to be bound by this agreement.

Applicant Signature _____ Date _____

COMPLETE THIS SECTION IF YOU UNDER 18 YEARS OLD

If you are under 18, please have this agreement signed by your parent or guardian.

Guardian's Agreement:

My signature below indicates that I consent to the participation of _____ In the above described games.
(Name of Child)

Guardian's Signature _____ Address _____

Guardian's Name *(Please Print)* _____ Guardian's Relationship _____

City _____ Province _____ Telephone _____ Date _____