

**Action Acres**  
**WAIVER AND RELEASE OF LIABILITY**  
 READ CAREFULLY

In consideration of **Action Acres** furnishing services and/or equipment to enable me to participate in paintball games, I agree as follows: I fully understand and acknowledge that;

- (a) risks and dangers exist in my use of paintball equipment and my participation in paintball activities
- (b) my participation in such activities and/or use of such equipment may result in my 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 and or other ailments that could cause serious disability
- (c) these risks and dangers may be caused by the negligence of the owners, employees, officers or agents of **Action Acres**; 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.
- (d) by my participation 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 of other conduct of the owners, agents, officers, employees of **Action Acres**, or by any other person.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify **Action Acres** and it's owners, agents, officers 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 paintball equipment or my participation in paintball 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 or employees of **Action Acres**. This waiver is good through 03/01/09.

**Medical Permission Authorization**

If the participant is of minor age, the undersigned parent or guardian hereby gives permission for **Action Acres** to authorize emergency medical treatment as may be deemed necessary for the child named below while participating in paintball games from this date through 03/01/09.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE **ACTION ACRES** FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSE BY NEGLIGENCE OR ANY OTHER CAUSE.

I understand and agree that my picture may be taken while playing at Action Acres and published on the internet or in printed publications. I agree not to hold Action Acres or any person taking pictures or videos at Action Acres responsible for any liability that might arise from the publication of such pictures.

<b>Print Name (Clearly)</b>	Age	Date of Birth	Emergency Phone
Signature	Address	City, State, Zip	
Signature of Parent/Guardian (if less than 18 years old)	E-mail		
DATE _____	Team _____		
	Rank _____		

**Equipment Rented**

**marker, hopper, mask, co2 tank, mini, 3000 tank, 4500 tank, barrel plug**