

# Shiloh Chapel Paintball Liability Waiver

(print out form and sign)

Name of player: \_\_\_\_\_

In Consideration of being permitted to participate in any way in the sport and activities of paintball, I acknowledge, appreciate and agree that:

- A. The risk of injury from the activity and weaponry involved in paintball is significant, including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk of serious injury does exist.
- B. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of those persons released from liability below, and assume full responsibility for my participation; and,
- C. I understand that the activities of paint ball are physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest player as soon as practical; and,
- D. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the pastors, trustees, all officers, and all staff and corporation members of the church property at Shiloh Chapel, with respect to any and all injury, disability, death, or loss or damage to person or property.
- E. I understand and agree that this Release of Liability Agreement covers each and every paintball activity and event in which I participate in at Shiloh Chapel.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement. This is to certify that I, as parent/guardian of

\_\_\_\_\_, with legal responsibility for this participant, do consent and agree not only to his/her release of Releasees, but also to release and indemnify the assigns, and next of kin.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signed: \_\_\_\_\_ Phone# \_\_\_\_\_

(if over 18, participant may sign)

Address: \_\_\_\_\_

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