## Industry Insurance Programs

## Summertown Airsoft = SA Phone: (615) 203-2754

## RELEASE OF LIABILITY, INDEMNITY AND ASSUMPTION OF RISK READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any Pointball and/or Airsoft activities including but not limited to, playing, using the premises of renting and operating equipment leased, sonctioned and/or operated by the above named vendor. I acknowledge and agree that:

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Paintboll and/or Airsoft equipment and my participation in Paintball and/or Airsoft 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 paralysts, eye injury, blindness, heal stroke, heart attack, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, afficers or agents of SA; the negligence of the participants, the negligence of others, accidents, breaches of confrool, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unfareseeable causes; and (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 port by the negligence or other conduct of the owners, agents, afficers, employees of SA, or by any other person.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntorily agree to release, waive, discharge, hold harmless, defend and indemnity SA and it's awners, agents, officers and employees from any and ail claims, actions or losses for bodily injury, property damage (including, but not limited to, arising out of the actual or alleged transmission of a communicable disease), wrongful death, loss of services or otherwise which may arise out of my use of Paintboll and/or Airsoft equipment or my participation in Pointball and/or Airsoft activities. I specifically understand that I am releasing, discharging and walving 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 SA. This Waiver is good through 10/25/2022.

## MEDICAL PERMISSION AUTHORIZATION

If the participant is of minority age, the undersigned parent or guardian hereby gives permission for SA to authorize emergency medical treatment as may be deemed necessary for the child named below white participating in Paintboll and/or Airsoft games.

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

Print Name	Age	Dale of Birth	Phone
Signature	Address		City, State Zip
Signature of Parent/Guardian (I less than 18 years old)		E-mail	
Date:			