

Waiver and Release of Liability FOR BILL'S EXTREME ADVENTURE LLC
DBA Bill's Extreme Paintball & Laser Tag

Please Read Carefully

In consideration of Bill's Extreme Adventure LLC furnishing services and /or equipment to enable me to participate in paintball, battle bows, & or laser games, I agree as follows:

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Paintball, battle bows, and or Laser Tag equipment and my participation in these 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 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 Bill's Extreme Adventure LLC; 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; 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 part by the negligence or other conduct of the owners, agents, officers, employees of Bill's Extreme Adventure LLC, 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 Bill's Extreme Adventure LLC and it's owners, agents, officers and employees from any and all claims, actions, or losses for bodily injury, property damage, wrongful death, injury thru animals or pests of outdoor nature loss of services or otherwise which may arise out of my use of Bill's Extreme Adventure LLC equipment or my participation in Paintball, battle bows, or Laser tag 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 Bill's Extreme Adventure LLC.

Medical Permission Authorization

If the participant is of minority age, the undersigned parent or guardian hereby give permission for Bill's Extreme Adventure LLC to authorize emergency medical treatment as may be deemed necessary for the child named below while participation in paintball, battle bows, and or Laser tag games.

I have read the above waiver and release and by signing it agree it is my intention to exempt and relieve Bill's Extreme Adventure LLC from liability for personal injury, from communicable disease, property damage, or wrongful death caused by negligence or any other cause.

By participating in any paintball, battle bows, or laser tag activities, I agree to allow Bill's Extreme Adventure LLC to use my likeness in a photograph, video, or audio recording in any publications, promotional products or websites relating to Bill's Extreme Adventure LLC services or products without payment or consideration. I understand and agree that all photos taken will become the property of Bill's Extreme Adventure LLC and will not be returned. I hereby irrevocably authorize Bill's Extreme Adventure LLC to edit, alter, copy, exhibit, publish, or distribute these photos for any lawful purpose. In addition, I waive any right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photo.

Print Name

Age

Date of Birth

Phone

Signature of participant

Address

City, State Zip

Signature of Parent/Guardian *(If player is less than 18 yrs old)*

DATE: _____