

# NATIONAL SPORTS ENTERTAINMENT & RECREATION ASSOCIATION

*Industry Insurance Programs*

[www.nsera.com/paintball](http://www.nsera.com/paintball)

**Wayne's World of Paintball, Inc.=WWP Fax: (352) 591-2210**

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

**IN CONSIDERATION of being permitted to participate in any Paintball and/or Airsoft activities including, but not limited to, playing, using the premises of, renting and operating equipment leased, sanctioned 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 Paintball 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 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 **WWP**; 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 **WWP**, 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 **WWP** 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 and/or Airsoft 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 **WWP**. This waiver is good through 3/1/2010.

## **MEDICAL PERMISSION AUTHORIZATION**

If the participant is of minority age, the undersigned parent or guardian hereby gives permission for **WWP** to authorize emergency medical treatment as may be deemed necessary for the child named below while participating in Paintball 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 WWP FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Age

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State Zip

\_\_\_\_\_  
Signature of Parent/Guardian (if less than 18 years old)

\_\_\_\_\_  
E-mail

Date: \_\_\_\_\_

**WAYNE'S WORLD OF PAINTBALL**  
**AMATEUR ATHLETIC**  
**MINOR WAIVER AND RELEASE OF LIABILITY**

<b>Children</b> <b>10 - 18</b>
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In consideration of being allowed to participate in any way in **Wayne's World of Paintball, Ocala, Florida** athletics/sports program, and related events and activities, the undersigned:

1. Agree that the parent(s) or legal guardian(s) will instruct the minor participant that prior to participating he or she should inspect the facilities and equipment to be used, and if the participant believes anything is unsafe, he or she should immediately advise his or her coach or supervisor of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaged in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence but the action, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risk and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue **The Scenario Directors, Wayne's World of Paintball, Ocala, Florida**, its affiliated clubs, their respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN THIS RELEASE FREELY AND WITHOUT DURESS OR UNDER INFLUENCE OF ANY KIND.

\_\_\_\_\_  
PARENT OR GUARDIAN (Signature/Relationship)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT OR GUARDIAN (Signature/Relationship)

\_\_\_\_\_  
DATE

Printed Name of Parent or Guardian: \_\_\_\_\_

Printed Name of Participant: \_\_\_\_\_

Address of Participant: \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_

Team Name: \_\_\_\_\_