

Full Blast Rentals, LLC.

**RELEASE/WAIVER OF LIABILITY AND ASSUMPTION OF RISK
APPLICATION TO PLAY OR OBSERVE (COVENANT NOT TO SUE)**

Name: _____ **Age:** _____

Date _____ **Phone:** _____

Address: _____ **State:** _____ **Zip Code:** _____

The undersigned has asked Full Blast Rentals, LLC. to be allowed to play paintball and acknowledges that the game involves physical exertion and other risks, known and unknown and may result in injury to the undersigned or the others playing the games, even if all safety rules are followed. Is aware of the possibility of risks of injury including but not limited to, being shot by a paintball, falling, tripping, snake bite, heat stroke, heart attack, being shot by firearms, being caught by rocks, snow, mud, or water, subject to insect bites, stings, piercing plants, punctures by exposed nails. Improper use, malfunctions of equipment by the undersigned or any other player and others not following the safety rules. Players will be exposed to both natural and manmade hazards. The possibility of permanent disability or death does exist.

Agrees to play the game according to the rules which have been explained and to follow directions; and that such rules and procedures not followed by others could result in my injury or death; Warrants and acknowledges that his/her physical condition is excellent and his/her mental state is sufficiently stable to enable him/her to participate safely in the game. This includes being on any medication that would pose a risk to him/her under physically, exerting conditions.

Agrees to use paintball equipment in a manner which will not cause injury or damage to himself/herself or other playing; or property of others. Certifies that he/she is over 18 years old;

Understands that serious and permanent eye injury, including loss of eyesight, can occur if paintball safety eyewear is not worn in any area where paintball buns may be intentionally or accidentally discharged. I understand that it is my responsibility to wear approved safety eyewear and I accept that responsibility. At times eyewear may become fogged or dirty and despite any other problems I will not remove them.

Understands that loss of hearing from an ear shot, disorientation and injury from throat, groin, head or ear shots can occur if proper safety or equipment is not worn to protect these areas, and understands it is his/her responsibility to wear or not wear such items.

In consideration of being permitted to play the game, the undersigned, on behalf of himself/herself, his/her successors or assigns, hereby releases and forever discharges Full Blast Rentals, LLC., Managers, equipment distributors, and their successors, assigns, employees, officers, agents, dealers, or operators both jointly and severally, from any and all actions, covenants, claims and demands for damages, costs, expenses (including attorney's fees", loss or injury, however arising, including negligence of Full Blast Rentals, LLC. which may have been or may be sustained by the undersigned in any way, relating to or arising out of playing paintball or the equipment, including but not limited to, the manufacture, selection, delivery, possession, use, or operation of the equipment or the natural environment. The undersigned desires and assumes any and all risks.

This document is intended to be a legally binding contract relieving the game operators, land owners, and their employees from liability from injury to you. If you have any doubts concerning any aspects of its contents, consult an attorney before signing it. This release of liability agreement covers all paintball activities or events hereafter.

I hereby agree to the above release and understand the referenced safety rules. I have read each and every item of this waiver. I understand what each and every item means and I agree to abide by the terms of this waiver. This waiver applies to any and al games I participate in at present or in the future. In witness thereof, the undersigned has executed this release

on: **Date:** _____ **Signed Name:** _____

Witness: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER 18 AT THE TIME OF SIGNING)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to this release of liability and to all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns, and next of kin.

Parent/Legal Guardian Signature: _____

Date: _____ **Emergency Phone Number:** _____

Paintball Players Safety Rules

- Obey referees at all times
- No shooting up in the air*
- No discharging guns outside of the playing field*
- No shooting over the netting or towards the highway *
- No shooting the referees
- No shooting at anyone within 20 feet
- Masks must be worn at ALL times while inside the playing field*
- All guns must have an approved barrel blocking device and must have the safety engaged when outside of field. This includes in the Adventure Center, parking lot, and viewing areas
- No fighting of any kind*
- No unsportsmanlike conduct
- Guns that dispense more than 15 rounds per second are not permitted
- Do not use any paintballs that have fallen on the ground
- All guns must be chronographed and are not allowed to shoot over 285ft./sec

These rules are for everyone's safety. In case of a violation you will first get **ONE** warning. On the second offence you will be ejected from the game. On the third offence you will be ejected for the rest of the day!

*** Immediate ejection from facility NO warnings NO exception NO refunds!**

I agree to obey the referees and play by the rules of the Full Blast Adventure Center

_____	_____	_____
Participants Name (print)	Participants Signature	Date
_____	_____	_____
Parent or Legal Guardian Name (print)	Parent or Legal Guardian Signature	Date