

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

In consideration of participating in the game of paintball, I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity.

I fully understand that this activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those or others participating in the event, the conditions in which the event takes place, or the negligence of the named below; and that there may be other risks not known to me or not readily foreseeable at this time, and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in this activity.

I hereby release, discharge, and covenant not to sue Saints Paintball, its respective administrator, volunteers, and other participants, sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the herein) from all liability, claims, demands, losses or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, and assumption of risk, I or anyone on my behalf, makes a claim against any of the releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Signature of participant	Date	Address	
Printed name of participant		City, State	Zip
Email address		Signature of parent or guardian	 Date
Phone Number		Printed name of parent or guardian (if under 18)	
/ / Birthdate			