Blitz Sports, Inc. DBA Blitz Paintball = Blitz /Phone: 303-337-7109 **READ CAREFULLY**

PRINT NAME

Recreational Activity Release of Liability, Waiver of Claims, Express Assumption Of Risk and Indemnity Agreement

Express Assumption of Risk Associated with Recreational Activities.

hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with the recreational activity generally described as Paintball/Airsoft/Laser Tag, including the rental of equipment and transportation associated therewith of which I am about to engage in. I also acknowledge these risks are inherent in remaining on the Blitz property as a spectator or for any reason. Inherent hazards and risks include but are not limited to:

- 1. Risk of injury from the activity and equipment utilized is significant including the potential for permanent disability and death.
- 2. Possible equipment failure and/or malfunction of my own or other's equipment.
- 3. This activity takes place outdoors and therefore includes risks associated with exposure to elements, excessive heat, hypothermia, encountering objects either natural or manmade, exposure to animals with the attendant risks of kicking, biting, shying away, running off or otherwise moving in an unanticipated manner causing injury and/or death.
- 4. My own negligence and/or the negligence of others, including but not limited to operator error and ref decision making including misjudging terrain or weather.
- 5. Attack by or encounter with insects, reptiles, and/or animals.
- 6. Accidents or illness occurring with no quick access to medical facilities.
- 7. Fatigue, chill, and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.
- *I understand the description of these risks is not complete and that unknown or unanticipated risks may result in injury, illness, or death

I fully understand and acknowledge that; a) risks and dangers exist in my use of paintball equipment and my participation in paintball activities; or remaining near such activity (b) my participation in such activities and/or use of such equipment, or being near such activity may result in 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 Blitz; the negligence of participants, the negligence of others, accidents, breaches of contract, forces of nature or other causes. These risks and dangers may arise from foreseeable and unforeseeable causes; and (d) by my participation in these activities and/or use of equipment, or by remaining at Blitz, 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 Blitz, or 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 Blitz 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 activities or from being present on the property. 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 the Blitz.

PARENTAL CONSENT

For Participants of Minority Age, this is the clarify that I (the undersigned), as Parent, Guardian, Temporary Guardian with legal responsibility for this participant, do understand the nature of the above referenced activities and the minors experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby voluntarily agree to release, waive, hold harmless, defend and indemnify Blitz and it's owners, agents, officers and employees, or any other person from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise on my and my minors account which may arise out of the minors use of paintball equipment or the minors participation in paintball activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I, or the minor may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers or employees of the Blitz.

MEDICAL PERMISSION AUTHORIZATION

For Participants of Minority Age the undersigned parent or guardian gives permission for Blitz to authorize emergency medical treatment as may be deemed necessary for the child named below while participating in paintball games or at Blitz or while on the property.

			PARENTAL CONSENT Parent or Legal Guardian only	
(Print Name)	Age	(Date of Birth M/D/Y)		
			Printed Name	
Address	City/State/Zip	Phone		
			Signature	
ignature		Date		
			Print Name of Minor	Date

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