

Splatter Action Paintball = SAP AKA Play Extreme Sports = PES Phone: (316) 814-3830

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

IN CONSIDERATION of being permitted to participate in any game or activity 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, Airsoft and/or Laser Tag equipment and my participation in any activities at **SAP/PES**; (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 **SAP/PES**; 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 **SAP/PES**, 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 **SAP/PES** 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 any game equipment or my participation in any activities at **SAP/PES**. 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 **SAP/PES**.

This waiver remains in effect for every visit and all activities at SAP/PES through **1/1/2019**.

MEDICAL PERMISSION AUTHORIZATION

If the participant is of minority age, the undersigned parent or guardian hereby gives permission for **SAP/PES** to authorize emergency medical treatment as may be deemed necessary for the child named below while participating in Paintball, Airsoft, Laser Tag and/or any games at **SAP/PES**.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO

EXEMPT AND RELIEVE SAP/PES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

Print Name _____ Age _____ Date of Birth _____ Phone _____

Address _____ City, State, Zip _____

Signature _____

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