CHECKROW SPORTS MINISTRY

READ CAREFULLY AND PLEASE PRINT CLEARLY AND LEGIBLE

WAIVER AND RELEASE OF LIABILITY

In consideration of Checkrow Sports furnishing services and/or equipment to enable me to participate in paintball games, I agree as follows.

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Paintball equipment and participation in Paintball activities; (b) my participation in such activities and/or use of such equipment may result in my injury 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 ailment that could cause serious disability; (c) these risks and dangers may be caused by the negligence of owners, employees, officers or agents of CHECKROW SPORTS; 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 the 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 CHECKROW SPORTS, 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 CHECKROW SPORTS 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. 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 CHECKROW SPORTS. This waiver and release good through December 31st, 2018.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE HOPE SPORTS FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

ALL PLAYERS OR SPECTATORS AT HOPE SPORTS MUST COMPLETE A SAFETY ORIENTATION BEFORE PARTICIPATING AND/OR ENTERING PLAYING FIELD AREAS. IF YOU CANNOT FOLLOW THE FIELD RULES YOU ARE NOT ALLOWED TO PLAY THAT DAY OR ALLOWED IN PLAYING AREAS.

Date Signed PLEASE PRINT CLEARLY AND COMPLETE EACH LINE AS REQUIRED

Player / Participant Printed Name	Age	Date of Birth	Phone		
Player Participant Signature		Address	City	State	Zip
	Medical Permiss	sion Authorization			
Minimum Age requirement of 12 years to participant is of minority age, the unders authorize emergency medical treatment paintball activities from this date throug	signed parent or gu as may be deemed	ardian hereby gives per I necessary for the child	mission for CHEC	KROW SPOI	RTS to
Parent / Guardian Signature	e-mail addı	ress	Em	Emergency Phone	