

THIS IS A RELEASE OF LIABILITY – READ BEFORE SIGNING

NOTE: THIS FORM MUST BE READ AND SIGNED BEFORE THE PARTICIPANT IS ALLOWED TO TAKE PART IN ANY PAINTBALL EVENT AT 27100 NE 9TH ST. CAMAS, WA. 98607 OWNED BY PATRICK C. LYNCH AND NICOLE K. LYNCH.

PARTICIPANT'S NAME _____ DATE OF BIRTH _____

IN CONSIDERATION of being permitted to participate in any way in the sport and activities of paintball at the address of 27100 NE 9th. St. Camas, WA 98607 owned by Patrick C. Lynch and Nicole K Lynch, I acknowledge, appreciate, and agree that:

1. The risk of injury from the activity and weaponry involved in paintball is significant, including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk of serious injury does exist;
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE of those persons released from liability below, and assume full responsibility for my participation; and,
3. I understand that the activities of paintball are physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of Patrick Lynch or assistants as soon as practical; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS PATRICK C. LYNCH AND NICOLE K LYNCH, the owners of premises used to conduct the paintball activities, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
5. I understand and agree that this Release of Liability Agreement covers each and every paintball activity and event in which I participate in hereafter.

I HAVE READ THE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____
PRINTED NAME

X _____ Date signed: _____
PARTICIPANT'S SIGNATURE

ADDRESS CITY STATE ZIP CODE

IF APPLICANT IS A MINOR (UNDER 18 YEARS OF AGE), HE/SHE WILL NEED PARENT/LEGAL GARDIAN SIGNATURE

I, the undersigned, do hereby certify that I am the parent/legal guardian of

I do hereby give my consent to Patrick C. Lynch and Nicole K. Lynch to allow him/her to participate in this activity. I agree to be bound by the terms, conditions and limitations set forth herein. I am signing it freely and voluntarily without any inducement.

X _____
PRINTED NAME OF PARENT OR GUARDIAN

X _____
SIGNATURE OF PARENT OR GUARDIAN CONTACT PHONE #