Adrenaline Zone Paintball Laser Tag

WAIVER AND RELEASE OF LIABILITY

In consideration of Adrenaline Zone Paintball (herein referred to as AZP) furnishing services and /or equipment to enable me to participate in laser tag games, I agree as follows:

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Laser Tag equipment and my participation in Laser Tag 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, 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 AZP; 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 AZP, 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 AZP 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 Laser Tag equipment or my participation in Laser Tag 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 AZP.

I grant to AZP, its representatives and employees, on behalf of myself and any minors for which I am responsible the right to take photographs or film (of whatsoever nature) records of any or all of its activities and on behalf of myself and any minors for which I am responsible I/we hereby agree that AZP may use such records for promotional and/or commercial purposes without any remunerations to me. I/we hereby assign all media in which my name, image or likeness might be used by AZP. I/we agree that AZP may use such photographs and video for any lawful purpose, including for example such purposes as publicity, illustration, advertising and web content.

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

Print Name	AGE	Date of Birth
Address	City/State/Zip	
Signature of Player	Today's Date	Phone #
Signature of Parent/Guardian (if less than 18yrs. old)	Today's Date	Phone #