BILL'S EXTREME ADVENTURE LLC

Bill's Extreme Paintball & Laser Tag

Waiver and Release of Liability

Read Carefully

In consideration of Bill's Extreme Adventure LLC furnishing services and /or equipment to enable me to participate in paintball & or laser games, I agree as follows:

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Paintball and or Laser Tag equipment and my participation in Paintball and or Laser tag activities; (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 Bill's Extreme Adventure LLC; 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 Bill's Extreme Adventure LLC, 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 Bill's Extreme Adventure LLC 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 and or Laser tag equipment or my participation in Paintball or 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 Bill's Extreme Adventure LLC. This waiver is good for 2016-2017.

Medical Permission Authorization

If the participant is of minority age, the undersigned parent or guardian hereby gives permission for Bill's Extreme Adventure LLC to authorize emergency medical treatment as may be deemed necessary for the child named below while participation in paintball and or Laser tag games from this date through 2016-2017.

I Have read the above waiver and release and by signing it agree it is my intention to exempt and relieve Bill's Extreme Adventure LLC from liability for personal injury, property damage or wrongful death caused by negligence or any other cause.

_____ ____ _____ _____

Print Name Age Date of Birth Phone

_____ _____ _____

Signature Address City, State Zip

_____

_____

Signature of Parent/Guardian E-mail
(If less than 18 yrs old)

_____

DATE