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.
PARTICIPANT'S NAME DATE OF BIRTH
(Please Print) IN CONSIDERATION of being permitted to participate in any way of the sport and activities of paintball under the auspices of THE AMERICAN PAINTBALL LEAGUE, 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 mir mize this risk, and 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 y participation, I will bring such to the attention of the nearest official as soon as practical; and,
4. I, myself and on behalf of my heirs, assigns, personal representative and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE AMERICAN PAINTBALL LEAGUE (APL), CAPT'N CARL'S GAMES INC., the owners and lessors of premises used to conduct the paintball activities, their officers, officials, agents and/or employees ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASES OR OTHER-WISE, except that which is the result of gross negligence and/or wanton misconduct.
5. I understand and agree that this Release of Liability Agreement covers each and every paintball activity and event in which I participate hereafter.
I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND IT'S TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.
X Date Signed: Phone #:
PARTICIPANT'S SIGNATURE
ADDRESS
CITY, STATE ZIP CODE E-MAIL ADDRESS
FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)
This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree not only to his/her release of the American Paintball League (APL) and all other Releases but also to release and indemnify the releases from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns, and next of kin.
XPARENT/GUARDIAN'S SIGNATURE EMERGENCY PHONE #'S

Date Signed : _____