



**THE  
PAINTBALL  
PLACE**

The Paintball Place Pty Ltd  
Cnr Springs and Greta Rds  
Kulnura NSW 2250

Ph: 4376 1411

Fax: 4376 1488  
[www.paintballplace.com.au](http://www.paintballplace.com.au)

**PARENT / GUARDIAN CONSENT FORM**

**FOR 16 AND 17 YEAR OLD PLAYERS**

**REASON: To participate in paintball games at The Paintball Place**

**Important: By signing below I acknowledge the following:** My child is over 16 years of age. I hereby state that I am making a free and fully informed decision and give my consent for him/her to participate in the paintball games at The Paintball Place. I hereby indemnify The Paintball Place and its employees and agents against any future liabilities for any accident or by incident involving my child during this excursion whatsoever.

**As Parent / Guardian of**

.....

**I, name:**

.....

**Relationship:**

.....

**Signature:**

.....

**On this date:**

.....

**Contact Phone Number:**

**\*\*\*\*\* If you are 16 or 17 years of age you must bring this form completed and photo identification with you on the day of play.**

**NO COMPLETED FORM,**  
**NO PHOTO ID**  
**NO PLAY**