

# THE PAINTBALL PLACE PTY. LTD.

## WAIVER RELEASE AND INDEMNIFICATION FORM

PLEASE PRINT CLEARLY

I ..... Date of birth .....  
(First name) (Surname)

Address .....

(Initial) ..... Post code ..... Occupation .....

hereby acknowledge that:

..... (1) I have reached the age of 16 years.

..... (2) I am aware that participation in said game may be hazardous and result in injury.  
I nevertheless wish to assume all risks.

..... (3) I hereby agree for myself, my executors, administrators, heirs, next of kin,  
successors and assigns to:

(a) indemnify the the company and the owners for the time being of the land upon  
which the game is being played against all actions, proceedings, claims, demands,  
costs and expenses in respect of or in any way arising out of my negligence, wilful act  
or omission on my part or my failure to abide by the rules of the said game.

(b) not make any claim or demand of any kind or institute any proceedings against the  
Company for any injury damage of any kind or death sustained by or occasioned to me  
in the course of or incidental to playing the game or arising or resulting directly or  
indirectly from any act omission, neglect or default on the part of the Company arising  
or resulting from me being on or near the designated playing field area or arising or  
resulting from faulty equipment issued to me by the company.

..... (4) No agent, servant or representative of the Company has the authority to alter, modify  
or waive any of the above conditions.

..... (5) Whenever the word "Company" is referred to in these conditions, it shall mean The  
Paintball Place Pty. Ltd. and shall include all employees, servants and agents thereof.  
Where the word "game" is used it shall mean 'paintball' (or 'skirmish').

..... (6) I agree and undertake to WEAR AND NOT REMOVE MY GOGGLES whilst on the  
designated playing field or in the safety zone.

..... (7) I have read and fully understand this document.

Signature of Participant ..... Date .....

Signature of Witness .....

Name of Witness (PRINT) .....

Address of Witness (PRINT) .....

..... Postcode ..... (Staff.....)