Howell's Mill Christian Assembly: Paintball Liability Waiver

Construction Zone: Paintball Course
99 Christian Camp Road, Ona WV 25545
304-743-4332 www.howellsmill.org

THIS IS A LEGALLY BINDING DOCUMENT. READ IT CAREFULLY. IF YOU DO NOT UNDERSTAND ANY PART, DO NOT SIGN AND CONSULT AN ATTORNEY. NO ONE ELSE HAS ACCESS TO THIS INFORMATION EXCEPT HMCA STAFF.

<u>PLEASE INITIAL EACH LINE</u> :	Age:	Birthday:
The participant is at least 11 Participants 8-10 may play in non combat g		age 11 is allowed to play on the field in combat games. out may not shoot at other players.
1 I am in good health and it is	my responsibility to cons	ult a physician before playing paintball.
		red, paintball in an inherently dangerous activity; the risk pment malfunctions, falling over/on natural and man-made
3Serious and permanent injur maybe intentionally or unintentionally disc		ar approved safety goggles in any area where paintball gue my goggles on the playing field.
4If I remove my facemask for facilities for the day with no monetary reim		while on the playing field, I may be required to leave the ny goggles on while on the playing field.
		with a barrel bag, I may be required to leave the facilities n barrel covered while off the playing field.
6I will not kick, hit, push, or be equipment in any purposeful manner. I wil		nner destroy or alter any structure or part of the facilities lacement of said structure or equipment.
		nal or anything I may rent. HMCA Camp is not responsibly for negligent damages to the rental equipment.
managers, supervisors, employees, and/or t limited to HMCA Camp Inc, for all dama limitation including attorneys fees and expe any way connected with or arising from my	heir agents, and all others ges hazards, personal inju- enses they or I may incur participating or observa-	all sponsors, organizers, property owners, proprietors, s connected to the paintball activities including but not uries, claims, and/or liabilities whatsoever without after I have been a participant or spectator incidental or tion in such activities including but not limited to the eration of all involved equipment or grounds.
DATE/ PHONE NU	JMBER	CELL:
PARTICIPANT NAME	PARTIC	IPANT SIGNATURE
PRINT YOUR ADDRESS		
CITY	STATE	ZIP
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