

LASERTAG THIS IS A RELEASE OF LIABILITY FOR LASERTAG - READ BEFORE SIGNING!

NOTE: THIS FORM MUST BE READ AND SIGNED BEFORE THE PARTICIPANT IS ALLOWED TO TAKE PART IN ANY LASERTAG EVENT. If you disagree with or do not understand any provisions contained in this release do not sign it.

IN CONSIDERATION of being permitted to participate in any way in the sport and activities of LASERTAG at THE SIEGE PAINTBALL, LLC, I acknowledge, appreciate, and agree that:

1. There is a risk of injury from the activity involved in LASERTAG and while particular personal discipline will minimize the risk, the risk of 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 LASER TAG are physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. I understand that if I fail to follow any of the rules or regulations I will be asked to leave the premises. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest official as soon as practical; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, DEFEND, AND INDEMNIFY FROM LIABILITY THE SIEGE PAINTBALL LLC, the owners and lessors of premises used to conduct the LASERTAG activities, their officers, officials, agents and/or employees ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, 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 LASERTAG activity and event in which I participant hereafter. THIS WAIVER IS ONLY GOOD THROUGH **DECEMBER 31, 2014**.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTANDING ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PLEASE PRINT CLEARLY ALL INFORMATION EXCEPT FOR YOUR SIGNATURE:
ALL INFORMATION IS MANDATORY EXCEPT FOR YOUR E-MAIL. We occasionally send e-mails; we DO NOT sell our e-mail list.



PLAYER'S NAME _____ BIRTHDATE ____/____/____
First Middle Initial Last Example: 12 / 31 / 2000

PLAYER'S SIGNATURE _____ DATE ____/____/____
The PLAYER, regardless of age, needs to sign above.

PARENT'S SIGNATURE _____
Parents please sign and print your name above for players under 18.

ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL _____ PHONE # _____

- Select one: YES - I want my waiver kept on file for 2014 (not applicable if signed by "Other")
 NO - I will fill out a new one each time.

2014 LASERTAG WAIVER for JANUARY 1, 2014 - DECEMBER 31, 2014
THE SIEGE PAINTBALL, LLC IS INSURED BY WEST BEND MUTUAL INSURANCE.