

Splatter Bugs / Death Valley

Minors Indemnity Acceptance Form

THIS INDEMNITY ACCEPTANCE FORM IS TO BE SIGNED BY THE PARENT OR LEGAL GUARDIAN OF ANY PERSON UNDER THE AGE OF EIGHTEEN, WHO WISHES TO PARTICIPATE IN PLAYING THE GAME OF PAINTBALL, AT ANY OF THE RANGES, UTILISED BY **Splatter Bugs.**

1. I, the undersigned acknowledge that I have read or have been made aware of the safety rules pertaining to the participation by my child in playing the game of Paintball, at any of the ranges used by Splatter Bugs, and that I understand these rules and accept the risks which are inherent in the participation in the aforementioned game.
2. I am aware and understand that participation in the game of Paintball involves intensive physical and mental exertion. I warrant that my child is free from any medical condition that may endanger his/her life or well being or the life or well being of any other participant.
3. By my signature hereto, I undertake not to hold either the proprietor or Landlord(s) of Splatter Bugs liable for any injury, loss or damage which I or my child might sustain whilst participating in the game of Paintball, whether on the range or not, and howsoever arising irrespective of whether such loss, injury or damage can be attributed to any act or omission of any person in the employment of Splatter Bugs.

Minor's Details

Full name and surname : _____

Date of birth : ____/____/____

Parent/Legal Guardian's Details

Full names and surname : _____

Address : _____

: _____

Signature : _____

Date : ____/____/____

Phone : _____

Safety Rules:

Participants are always required to wear the supplied eye protection ("mask") whilst on the playing field.

Participants are not allowed to shoot deliberately at any other person's head.

Participants are required to give an opponent the chance to surrender if the opponent is at close quarters or unilaterally backs off.

Participants are required to cease fire and to stop the game immediately and call the range master in the event of them encountering a non-participant on the range.

Signature (Parent/Legal Guardian) : _____ **Date:** ____/____/____

www.hermanuspaintball.co.za

e-mail: deathvalley@hermanuspaintball.co.za