



Office Use Only

Driver's License

Passport

School ID

Birth Certificate

Other

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

CONDITIONS OF PARTICIPATION

To comply with NSW firearms legislation, all personal details must be completed and current photo identification must be presented and held by Shoalhaven Skirmish whilst the Player is on site.

Please Print These Details Clearly

Participant's Details

Name: _____ Age: _____ Date Of Birth: ____/____/____

Address: _____

Suburb: _____ Post Code _____

Email: _____

Mobile Number: _____ Occupation: _____

I Hereby Acknowledge and Understand That:

Please tick box

1. a. I am playing Paintball and I am over the age of eighteen (18) years
- b. I am playing Paintball and I am over the age of twelve (12) years (with parental consent)
2. I have read the reverse side of this document and fully understand the rules of the game paintball conducted by Shoalhaven Skirmish Pty Limited, and I agree to abide by those rules during my participation in the game.
3. The game is physically and mentally intense and requires extreme exertion to play. I am physically fit and mentally able to take the strain and exertion involved in playing the game. I have no disability, impairment or health condition which would be detrimental to my health or safety, or safety of other persons in participating. I am not under the influence of any drugs, alcohol or controlling substances. It is the player's responsibility to rehydrate themselves during breaks.
4. Participation in the game may be hazardous and can result in serious injury.
5. The game can be dangerous if not played exactly in accordance with the rules. Paintballs may bruise or break the skin.
6. Employees, servants or agents of the company have no authority to accept goods or articles for safe custody from any person and the company shall not be responsible for such loss or damage (no matter how or why it occurs) to any such goods left at the premises of the company;
7. No agent, servant or representative of the company has authority to alter, modify or waive any of the above conditions.
8. I am fully aware of the risks to myself and others in playing the game. I have agreed to participate in the game, and use the services of Shoalhaven Skirmish and the equipment supplied, entirely at my own risk.
9. Any breakage or loss of Shoalhaven Skirmish Pty Limited equipment loaned to me during the day will be charged to me at cost price.
10. There may be no or inadequate facilities for treatment or transport of me if I am injured.
11. I hereby release forever discharge and agree to indemnify and keep indemnified the company, its officers, employees, agents and contractors from any and all claims, suits, demands, expenses, costs, actions, proceedings of any nature whatsoever, which I, my executors or administrators or any other person has or might assert on my behalf arising from, in relation to, incidental to or by virtue of any deaths, injury, loss or damage suffered or sustained by me in connections with my playing paintball or at any time I am on or near the property occupied by Shoalhaven Skirmish Pty Limited, notwithstanding whether such death, injury, loss or damage is due directly or indirectly from any negligent act, omission, default, breach of duty, breach of statutory duty, or breach of control by or on behalf of the company, its officers, employees, agents or contractors. This release, discharge and indemnity shall be deemed to extend to:
 - a) Any death, injury, loss or damage arising out of the supply of faulty or inadequate equipment.
 - b) Any death, injury, loss or damage suffered or sustained by any other person as a result of my negligent act, omission, default or breach of any duty or contract.
12. I release and approve Shoalhaven Skirmish Pty Limited to use all images and footage, my name and likeness recorded on the day. I further understand the master tape remains the property of Shoalhaven Skirmish Pty Limited and that there will be no restrictions on the number of times that my name and likeness may be used.
13. I agree to leave my identification with Shoalhaven Skirmish Pty Limited while playing the game. I agree to be responsible for my game tag and pay up to \$500 if lost or damaged



PAINTBALL RULES OF THE GAME

Before entering any Shoalhaven Skirmish playing field;

All persons, players or spectators must read and sign the "Conditions of Participation" detailed on the reverse side and in so doing, agree to abide by the following rules:

1. All instructions and decisions of the referees and Shoalhaven Skirmish staff must be followed at all times.
2. Only approved safety equipment shall be used, all private safety equipment must be submitted to Shoalhaven Skirmish management for examination prior to use.
3. Protective clothing including face mask/ goggles must remain on at all times unless instructed otherwise by Shoalhaven Skirmish staff.
4. No player shall fire upon another player at a range closer than five metres.
5. No player shall deliberately shoot anyone in the head or face.
6. No player shall deliberately shoot whilst moving between gaming zones.
7. Shoalhaven Skirmish reserves the right to remove immediately from the game and field any person or group who in the opinion of Shoalhaven Skirmish or its staff has breached any of these rules or is engaging in any behaviour which Shoalhaven Skirmish or its staff consider to be unacceptable or dangerous.

AGE DECLARATION & PARENTAL CONSENT

This section is to be completed by the parent/legal guardian of the young person wishing to participate in Paintball at Shoalhaven Skirmish Pty Limited. Any person aged 16 to 17 years of age must provide this completed section to Shoalhaven Skirmish Pty Limited staff at the time of Sign in. Shoalhaven Skirmish Pty Limited reserves the right to refuse entry to any person who has not provided this.

Parent/Guardian's Details

Name: _____

Address: _____

Suburb: _____ Post Code _____

Contact Numbers: Home _____ Mobile _____

Email: _____

(must please provide at least two contact numbers)

Pease Read Carefully

By signing below you acknowledge and accept the following:

1. **I hereby state that my child/ward is _____ years of age.**
2. I have read and understood the Conditions of Participation and the Rules of the Game. I am fully aware of all the risks involved including the possibility of injury to mu child/ward. I nevertheless accept and assume such risks on his/her behalf. I also agree to be responsible for the cost of any breakages or loss of equipment, and any other monies owed.
3. 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 Shoalhaven Skirmish PTY Limited.
4. I hereby indemnify and shall keep indemnified Shoalhaven Skirmish PTY Limited, its officers, employees, agents and contractors against injury, loss or damage suffered by my child/ward or for which he/she might otherwise be responsible.

Parent/Guardian's Signature: _____ **Date:** ___ / ___ / ___



SIGNATURE OF PARTICIPANT: _____ **Date:** ___ / ___ / _____