## **Futureball Inc. = FI Phone: (248)446-0772**

## RELEASE OF LIABILITY, INDEMNITY AND ASSUMPTION OF RISK READ BEFORE SIGNING

PARTICIPANT'S NAME		DATE OF BIRTH		
IN CONSIDERATION of being permitted to participate in limited to, playing, using the premises of, renting and oper above named vendor, I acknowledge and agree that:				
I fully understand and acknowledge that; (a) risks and dangers exist in my use of Paintball and and/or Airsoft activities;	/or Airsoft equ	ipment and my partic	cipation in Paintball	
(b) my participation in such activities and/or use of such activit	actures, parti	al and/or total paralys	sis, eye injury, blind-	
(c) these risks and dangers may be cause by the negligence of the participants, the negligence of or nature or other causes. These risks and dangers may	thers, accident	s, breaches of contrac	ct, the forces of	
(d) by my participation in these activities and/or use all responsibility for any losses and/or damages, whet other conduct of the owners, agents, officers, employed	her caused in	whole or in part by th		
I, on behalf of myself, my personal representatives and discharge, hold harmless, defend and indemnify FI and all claims, actions or losses for bodily injury, prootherwise which may arise out of my use of Paintball Paintball and/or Airsoft activities. I specifically under claims or actions that I may have presently or in the factions that I may have presently or in the future for agents, officers or employees of FI. This waiver is good	nd it's owners, perty damage, and/or Airsoft rstand that I a future for the I the negligent a	agents, officers and e wrongful death, loss of equipment or my par m releasing, dischargi negligent acts and wai acts or other conduct l	employees from any of services or rticipation in ing and waiving any ving any claims or	
MEDICAL PERMISS	SION AUTHOR	IZATION		
If the participant is of minority age, the undersigned authorize emergency medical treatment as may be departicipating in Paintball and/or Airsoft games.				
I HAVE READ THE ABOVE WAIVER AND RELEAS TO EXEMPT AND RELIEVE FI FROM LIABILITY WRONGFUL DEATH CAUSED BY NI	FOR PERSON	NAL INJURY, PROPE	ERTY DAMAGE OR	
Print Name	Age	Date of Birth	Phone	
Signature	Address	City,	State, Zip	

Signature of Parent / Guardian (if less than 18 years old)

Email Address