

Nationwide Paintball

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WAIVER OF LIABILITY AND ASSUMPTION OF RISK FORM

Dear Parent or Carer,

The purpose of this document is to ensure that you have been fully informed of all risks, dangers and of course benefits, prior to giving consent for your son or daughter under the age of 18 years to participate in an event at Nationwide Paintball. This form should be signed and returned complete with all 4 pages.

Background

Paintball is a combination of the childhood games "tag" and "hide & seek," but also much more challenging and sophisticated. Although there are many different game formats, typically a group of players will divide into two teams to play "capture the flag." The number of players on each team can vary.

The object of the game is to capture the other team's flag while protecting your own. While you are trying to capture a flag, you also try to eliminate opposing players by tagging them with a paintball expelled from a special airgun called a "marker." Games run from 20 to 45 minutes, depending on the size of the field and the number of players.

Playing paintball is a game of strong physical exertion. So between games, players take a break to check their equipment, get more paintballs and have a drink while they share stories about the thrills of victory and the usually funny agonies of defeat. Win or lose, everyone has a good time.

For safety, paintball players must always wear goggles specifically designed for paintball to protect their eyes. Goggles must be worn during a game and at all times when a person is in an area where shooting is permitted, such as the target range. A protective face mask is mandatory nearly everywhere and breach of our rules results in removal from the game zones.

A paintball is a round, thin-skinned gelatine capsule with coloured liquid inside it. Paintballs are similar to large round vitamin capsules or bath oil beads. The fill inside paintballs is non-toxic, noncaustic, water-soluble and biodegradable. It rinses out of clothing and off skin with mild soap and water. Paintballs come in a rainbow of bright colours: blue, pink, white, orange, yellow and more. When a paintball tags a player, the thin gelatine skin splits open, and the liquid inside leaves a bright "paint" mark. A player who is marked is eliminated from the game.

Paintball guns are called "markers," and are powered by carbon dioxide (CO²). The international safety limit on the speed (measured in feet per second, "FPS") at which a marker shoots a

paintball is 300 fps. A chronograph is used to test for speed limits, and all off Nationwide's markers are adjusted to shoot under the speed limit at approximately 260 fps for additional safety.

RISKS

All outdoor activities carry the potential risk for serious injury or even death. This includes playing paintball in woods where there are dangers and perils from fallen trees, low branches, rabbit holes and other natural hazards that can contribute to injury. It is also possible that paintballs fired from a CO² powered marker, can sometimes bruise and break the skin.

The situation is such that we only provide Public Liability Insurance cover against proven negligence by Nationwide and its staff. If parents wish to take out personal accident cover with respect to their children, then they must make their own arrangements. We have found this to be too cost prohibitive for us to fund and remain a viable youth project due to the high premiums required.

Unfortunately because of our society's litigation culture, some insurance companies are not even willing to quote for paintball as they consider it to be a high risk activity.

That is why we require parents to sign this "Waiver of Liability and Assumption of Risk" document, so that they have to fully accept the potential inherent risks of accident and injury that can occur when their children are playing paintball in a woodland or forest.

This all has to be balanced against the many thousands of paintball games played each week up and down the country with no problems whatsoever.

SAFETY RULES

Always listen and take note of the Safety Briefing given at the start of each session.

Always obey instructions from the Game Manager and the Marshals

Do **NOT** drink alcohol, smoke or take illegal drugs before or during the game.

Do **NOT** leave the game fields during play, stay within the defined boundaries.

Do **NOT** shoot at persons closer than 15ft.

Do **NOT** shoot at the head or face.

Do **NOT** climb any trees.

Do **NOT** deliberately shoot at any wildlife, respect the countryside.

Do **NOT** fire your marker once you have been eliminated.

Do **NOT** bring your marker into the designated safe zone, leave it on the gun rack outside.

Do **NOT** remove your goggles in the playing area. You may only do so in the designated safe zones.

Breach of these rules means you will be disqualified from playing and removed from our site.

Remember - Never fire anything from your marker other than the Paintballs provided by us AND goggles are not to be removed for any reason whatsoever in the game zones.

Photography - Consent for your child to be photographed or named in the media for our publicity purposes will be deemed to have automatically been given in consideration for them being able to play paintball.

Clothing & Medication - Parents are responsible for sending their children with all prescribed medication, appropriate clothing, footwear and gloves for playing paintball in woodlands. Bottled water is also essential.

The information you provide us with in the following sections must be accurate to help ensure everyone's safety and enjoyment. Nationwide Paintball staff reserve the right to inspect evidence of identity and age of those signing this Waiver document.

Please sign and return the complete form as soon as possible to the person who issued it to your son or daughter.

WAIVER OF LIABILITY & ASSUMPTION OF RISK

Please print clearly using black ink. To be completed by the child's parent or legal guardian.

Parent's First Name..... Parent's Surname

Parent's DOB..... (must be over 18)

Address.....

..... Postcode

Tel No (Home) Mobile.....

Email

PLEASE SIGN BELOW :

This is a legally binding document. Do not sign unless you wish to be bound by its terms.

As parent of whose date of birth is..... I have read, fully understood and am satisfied with the details supplied about the above mentioned paintball activity and GIVE CONSENT without any limitation whatsoever to my son or daughter taking part in paintball activities at Nationwide Paintball.

I DECLARE that I know of no medical reason why he or she should not participate and I am happy with arrangements outlined regarding Photography and Safety Rules regarding behaviour.

I AGREE that:

- a Nationwide Paintball only provides insurance cover against proven negligence by staff and volunteers and I should consider making my own arrangements for personal accident cover for my son or daughter.
- b I understand that there are dangers and perils from fallen trees, rabbit holes and other natural hazards that can contribute to injury. I further understand that paintballs fired can sometimes bruise and break the skin.

- c In consideration for the opportunity of son or daughter to participate in playing paintball, I hereby waive and release and indemnify Nationwide Paintball and their employees, agents and volunteers of any and all claims however arising whether in contract or for personal injury, property damage, and any losses whatsoever that may arise from my child playing paintball.
- d I hereby certify that I am a competent adult assuming these risks of my own free will being under no compulsion or duress and having had opportunity to take independent legal advice.

Signed **Date**

CONFIDENTIAL MEDICAL QUESTIONNAIRE

YOUNG PERSON'S NAME	DOB
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PARENT/GUARDIAN/NEXT OF KIN NAME AND INITIALS ADDRESS CONTACT NUMBER IN CASE OF EMERGENCIES HOME WORK	FAMILY DOCTOR'S NAME ADDRESS TELEPHONE NUMBER
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Has your son/daughter had any of the following	YES	NO
Asthma/bronchitis		
Sight/hearing disabilities		
Heart condition		
Fits, fainting or blackouts		
Severe headaches		
Diabetes		
Allergies to any known drugs		
Any other allergies, e.g. material, food, medicine, pollen, dust		
Any other illness or disability		
Has your son/daughter received vaccination against Tetanus in the last ten years?		
Is your son/daughter receiving medical or surgical treatment of any kind from either your Family Doctor or Hospital during the past three months?		
Has your son/daughter been given specific medical advice to follow in emergencies?		
Has your son/daughter received instructions on administering his/her own medication?		

If the answer to any of the questions above is YES, give details here (including dosage of any medicines or tablets). Parents are responsible for sending all prescribed medications with their child. If you would like to discuss any medical matter with Nationwide Paintball, please make an appointment to do so.

CERTIFICATION

I consent to my son or daughter receiving any necessary medical treatment for any injury or illness arising from playing at Nationwide Paintball and declare the above to be true.

SIGNED _____
Father/Mother/Legal Guardian

DATE _____