## **COSSIO INSURANCE AGENCY 864-688-0121**

## Recreational Activity Release of Liability, Waiver of Claims, Express Assumption of Risk and Indemnity Agreement

## Heritage Alliance, Inc/DBA Mr. Paintball USA

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I,	a about to engage in. I understand the significant including the potential of own or of other's including the relates risks associated with exposure the, exposure to animals with the attaincluding but not limited to operate location.  wild life.  The there are no immediate medical some reaction time and increase the complete and that unknown or	aintball and airs nat these Inhered for permanent ntal equipment to elements, ex- endant risks for or error and gui- ervices.	soft games and activities nt hazards and risks may injury, or death.  Accessive heat, hypotherm causing injury and/or des decision making	y nia,
By participating in the activities described above, I I, on behalf of myself, my personal representatives harmless, defend and indemnify Mr. Paintball USA actions for losses for bodily injury, property damag of paintball / airsoft equipment or my participation I specifically understand that I am releasing, disch future for the negligent acts or other conduct by the	and my heirs, hereby voluntarily and and it's owners, officers, agents, age, wrongful death, loss of services in paintball activities.  harging and waiving any claims or a	agree to release, and employees or otherwise w actions that I m	from any and all claims which may arise out of may ay have presently or in	y use
Med If the participant is a minor, the undersigned hereby treatment as may be deemed necessary for the child				ĺ
I HAVE READ THIS RELEASE OF LIABILITY ANI ITS TERMS, AND UNDERSTAND THAT I HAVE G AND VOLUNTARILY WITHOUT ANY INDUCEME	GIVEN UP LEGAL RIGHTS BY S			
Name of Participant	Signature of Adult Par	 rticipant	Date	
Address, city, state, zip				
Email Address	Phone Number	Birth	Date (month/Day/Ye	 ar)
For Participants of Minority Age, this is to clarify that, I, as P do consent and agree not only to his/her release of all releases to his/her involvement in these programs for myself, my heir	s, but also to release and indemnify the			

(Name of Parent or adult Legal Guardian) If participant is a less than 18 years of age

(Signature of Parent or adult legal Guardian of minor)