



Date: _____ Exp 12/31

CZ AIRSOFT **UNDER 18** WAIVER AND RELEASE OF LIABILITY READ CAREFULLY

In consideration of **CZ Airsoft, LLC** furnishing privately owned land located at: 29298 Ratliff Ln, Rhoadesville, VA 22542, to enable me to participate in Airsoft activities, I agree to the following:

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Airsoft equipment and my participation in Airsoft activities; (b) my participation in such activities and/or use of such equipment may result in my injury, or illness including but not limited to bodily injury, disease, sprains, fractures, partial and/or total paralysis, eye injury, blindness, heat stroke, heart attack, death, or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence others while participating at **CZ Airsoft, LLC** might include the negligence of others, accidents, forces of nature and acts of God. These risks and dangers may arise from foreseeable or unforeseeable causes or actions; and (d) by my participation in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages from my participation and activities here at **CZ Airsoft, LLC**.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify **CZ Airsoft, LLC**, agents, officers and property owners from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services which may arise out of my use of Airsoft equipment, facilities or my participation in Airsoft activities. I specifically understand that I am releasing, discharging, and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conducts by the agents or officers of **CZ Airsoft, LLC**, and its property owners.

CZ Airsoft, LLC reserves all photographic and video footage rights obtained on location. By participation in CZ Airsoft events, I consent that my image may be captured in photographs and/or video footage and utilized exclusively by **CZ Airsoft, LLC**, with no compensation for its usage. Use of images or video outside of CZ is unauthorized without the expressed permission from **CZ Airsoft, LLC**. Likewise CZ Airsoft, LLC will strive to never portray any player in a negative or exploitative situation or scenario without consent.

GUARDIAN / PARENT MUST COMPLETE THIS SECTION IF PLAYER IS UNDER 18 YEARS OLD:

If you are under 18, please have this Agreement guaranteed by having your parent or your legal court-appointed guardian sign below.

NO EXCEPTIONS!

GUARANTOR'S AGREEMENT: My signature below indicates that I guarantee all of the obligations imposed upon the minor participant under this Agreement and have read and fully understand all of its items. In addition, I declare I too have read and understand CZ Airsoft's "Safety Rules and Rules of Conduct", and will adhere to all mandatory Eye and Face Protection Systems policies.

Player / Guardian Acknowledgment of all SAFETY RULES: **GUARDIAN/PARENT MUST ALSO INITIAL**

- (1) Participants have read the recommended Rules and Eye/Face Protection Systems. **Initial:** _____ / _____
- (2) Participants have read and agree to abide the posted CZ's Field Safety Rules and Airsoft Player Conduct. **Initial:** _____ / _____

I hereby acknowledge that I have read this agreement, and have voluntarily and freely signed it with the intent that it be, and understanding that it is, a legally binding agreement. To the extent that I have any doubts concerning any aspect to its contents or their meaning, I will consult an attorney before signing it. **THIS IS A RELEASE/HOLD HARMLESS AGREEMENT, READ BEFORE SIGNING:**

As Guardian, I declare that I am at least 18 years of age, and have executed this Agreement on the day, month, and year written below. Further, by signing, I declare that I too have read, understood, and agree to CZ Airsoft, LLC's Safety Rules and Policies.

Guardian/Parent's Name (Please print LEGIBLY in BLOCK LETTERS): _____

Guardian/Parent's signature: _____ Relationship to minor player(s): _____
Birth date: _____ / _____ / _____

Address: _____

Email: _____

Minor's Name (Please print LEGIBLY in BLOCK LETTERS): _____

Minor's Birth date: ____ / ____ / ____ Minor's Signature: _____ Date: ____ / ____ / 20__

CZ Staff Verified: _____	Special Notes: _____ _____
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Additional minors to application if required

Minor's Name (Please print LEGIBLY in BLOCK LETTERS): _____

Minor's Birth date: ___ ___ / ___ ___ / ___ ___ Minor's Signature: _____ Date: ___ ___ / ___ ___ /20 ___

Minor's Name (Please print LEGIBLY in BLOCK LETTERS): _____

Minor's Birth date: ___ ___ / ___ ___ / ___ ___ Minor's Signature: _____ Date: ___ ___ / ___ ___ /20 ___

Minor's Name (Please print LEGIBLY in BLOCK LETTERS): _____

Minor's Birth date: ___ ___ / ___ ___ / ___ ___ Minor's Signature: _____ Date: ___ ___ / ___ ___ /20 ___

CZ Staff Verified: _____

Special Notes: _____
