



JLT Paintball is a Limited Liability Company

JLT PAINTBALL LLC
PRO SHOP AND FIELD HERMISTON OREGON
AIR - CO2 - PAINTBALLS - IONS - SPYDERS - TIPPMAN
EQUIPMENT - ACCESSORIES
RENTAL PACKAGES \$25. NO FIELD FEES
GUN SERVICES AND REPAIR ON MOST BRANDS
ALWAYS CALL FIRST 541-567-3498 541-571-349
EAST ON ELM TO DIAGONAL ROAD. RIGHT ON BAXTEF
LEFT ON RAYTON LANE TO 8022
WWW.JLTPAINTBALL.COM Jim and Darcie Trac
80224 RAYTON LN HERMISTON, OR 9783

READ CAREFULLY

WAIVER AND RELEASE OF LIABILITY

In consideration of JLT furnishing services and/or equipment to enable me to participate in paintball games, I agree as follows:

I fully understand and acknowledge that:

- _____ (a) risks and dangers exist in my use of Paintball equipment and my participation in Paintball 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 strains, 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 of the owners, employees, officers or agents of JLT; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; 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, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, employees of JLT, or by any other person.

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify JLT and its owners, agents, officers and employees from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of Paintball equipment or my participation in Paintball 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 conduct by the owners, agents, officers or employees of JLT PAINTBALL LLC

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I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE JLT FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

MEDICAL PERMISSION AUTHORIZATION

If the participant is of minority age, the undersigned parent or guardian hereby gives permission for to authorize emergency medical treatment as may be deemed necessary for the child named below while participating in paintball games.

PLAYER'S NAME _____ (Please Print)		DATE OF BIRTH _____	
X _____ PLAYER'S SIGNATURE		Date Signed: _____ Phone # (____) _____	
ADDRESS _____	APT # _____	CITY, STATE _____	ZIP CODE _____
E-MAIL ADDRESS _____			

X
SIGNATURE OF PARENT/GUARDIAN
if player is less than 18 years old

Emergency phone number(s)