

LASER COMBAT HOLD HARMLESS & WAIVER

EACH INDIVIDUAL MUST READ AND SIGN THIS RELEASE OF LIABILITY PRIOR TO PARTICIPATION IN ANY LASER COMBAT ACTIVITY

In order to participate in these activities, I the undersigned agree and acknowledge that: there is risk of injury, including a potential for permanent disability or death resulting from participation in these activities or from the equipment involved,

I freely assume all such risks both known and unknown and assume full responsibility for my participation and injury that may result.

I agree to fully comply with all rules, regulations and policies during my participation and understand Mid-Michigan Laser Combat reserves the right to remove me for failing to follow the same, without refund,

I hereby grant Management reproduction rights to use my name and likeness in all media, including the internet, for any purpose without further compensation to me,

I, for myself and on behalf of my heirs, successors, assigns, personal representatives and next of kin hereby release, and I agree to and shall defend, indemnify, and hold harmless, Mid-Michigan Laser Combat, their officers, officials, agents, employees, or property owners from any and all liability for injury, disability, death, loss or damage to personal property,

I acknowledge, understand and agree that I have read this release of liability and assume all risk associated with participating and that I sign this release of liability voluntarily and without inducement.

First Name (print)	MI	Last Name	Date of Birth (mm/dd/yy)	Phone
Player's Signature (If	over 18)		Address	
/ / Foday's Date (mm/dd/	уу)	City	State	Zip
Email Address/phone	e (optional	- used only for Mid-M	ichigan Laser Combat email update	es or specials)
MINOR AG	ED PART	<u>ICIPANTS</u>		
•			e in any laser combat activity unless a cipation and release by signing below.	
participant a hold harmle arising out o	and agree tess the aboof, his/her p	o his/her signing this re ve named companies a	egal responsibility for the above signe lease. I also agree to defend, indemn nd individuals from all liabilities resulti ivities for him/her, myself, my heirs, ext of kin.	ify, and
PARENT/G	UARDIAN'	S SIGNATURE		TE SIGNED

PARENT/GUARDIAN'S NAME (print)