Laser Combat League Waiver Form

Please fill out your information below and read the waiver

**YOU MUST BE 18 OR OLDER TO SUBMIT THIS FORM, IF NOT PLEASE HAVE YOUR PARENT OR GUARDIAN SUBMIT THIS FORM FOR YOU.**

**Player's Last Name: Player's First Name: .**

**Date of birth: Phone number: .**

**Email: Emergency Contact Number: .**

Are you 18 years of age? YES or NO. If no Please provide parent or guardian’s info below.

**Name of parent or guardian: Phone number: .**

In Consideration of the services of Laser Combat League and it’s agents, owners, officers, representatives, employees, volunteers, participants, and subsidiary (hereinafter collectively LCL). I hereby agree to release and discharge LCL on my Behalf of myself, my parents, my Heirs, assigns, personal representative and estate as follows:

1. **Inherent Risk:** I acknowledge that any outdoor/ Indoor activity entails known and unanticipated risk that could result in physical or emotional injury, death, or damage to myself, to property, or to third parties. I also understand and acknowledge that failing to properly use equipment increases risk of injury while participating in these activities.
2. **Express Assumption of Risk:** As Lawful consideration for being allowed to participate in activities offered by LCL, I expressly agree and promise on behave of myself and any of the minors for which I am accept and assume all the risk existing in this activity My/our participation in this activity is purely voluntary, And I/we elect to participate in spite of risk.
3. **Indemnity:** Should LCL or anyone acting on their behalf, be required to incur attorney’s fees and costs to enforce this agreement, I agree on behalf of myself and any of the minors for which I am responsible to indemnify and hold them harmless (in other words, I agree to pay for…) for all such defense fees and cost.
4. **Personal Condition & Insurance:** I certify that I/we have no medical, mental or physical conditions which could interfere with my/our safety or ability to participate in these activities, or else I/we are willing to assume and bear the cost of all risks that may be created, directly or indirectly, by any such condition. I/we further certify that I/we have adequate insurance to cover any injury, damage or emergency transportation costs ourselves.
5. **Photographic assignment:** I grant to LCL, It’s representatives and employees, on behalf of my and any of the minors for which I am responsible the right to take photographs or film (of whatsoever nature) records of any or all of its activities and on behalf of myself and any of the minors for which I am responsible. I/we agree that LCL may use such records for promotional and/or commercial purposes without any remuneration to me. I/we hereby assign all right, title and interest I/we hereby assign all rights, title and inters I/we may have in or to any and all media in which my name, image or likeness might be used by LCL. I/we agree that LCL may use such photographs and video for any lawful purpose, including for example such purposes as publicity, Illustration, advertising and web content.
6. **Legal Responsibility for Minors & age Certification:** I certify that I am over the age of 18 years and that I am the parent or guardian with legal responsibility for any minors on the document. I certify that the minors for which I am responsible have correctly provided their age and all those are over 7 years old in age.

**By Signing this document, I acknowledge for myself and any of the minors for which I am responsible that if anyone is hurt or property is damaged during my participation in this activity, I/we may be found by a court of law to have waived my/our right to maintain a lawsuit against LCL on the basis of any claim from which I/we have released them herein.**

**Signature: Date: Parent or guardian signature: Date:**