



Player Registration Form



Upon signing this form I/my child agree to participate in the paintball event entirely at my / my child's own risk. I recognise there are hazards whilst playing paintball. I understand there are hazards to be aware of around the centre which include but not limited to, fallen trees, sharp objects, holes, trip hazards, slip hazards, tree roots, game structures, buildings, barricades, raised platforms, stairs, walkways, mud, loose ground, standing water, animal or insect presence and stray shots. I understand that paintballs can bruise or break the skin. I acknowledge all jewellery should be removed before playing so it does not become tangled and/or cause injury.

I agree that Velocity Paintball will not be liable for any loss, damage, cost or expenses arising from my attendance which was not reasonably foreseeable by on the date of attendance at the centre or a private event except in the respect of death or personal injury resulting from any act or omission on part of the operator.

I agree to comply with all guidelines outlining the safe use of pyrotechnics. These are only for sale and use for participants aged 18 years and over. This includes but not limited to; wearing protective gloves when using pyrotechnics, not using a ThunderFlash within one metres distance from another player, placing all pyrotechnics on the ground rather than throwing them and only using pyrotechnics within the game field and during game play.

An accident book is kept onsite and any injury to a player must be notified to a staff member, recorded in it and signed by the injured person or their representative.

I understand I am responsible for items purchased during the day; the staff shall not be responsible for replacing any items that might become lost, stolen, dropped or accidentally broken. I accept that paintballs are sold in bags/scoops of approximate quantity and any shortfall should be reported to the Centre Manager immediately. Only paintballs bought from Velocity Paintball on the day, may be used.

I confirm and agree I will never deliberately shoot anyone in the face, head or within three metres, I will not remove safety goggles in the playing area and I will obey all safety requirements from the staffing team. I am responsible for ensuring the safety goggles issued to me fit so the goggles sit tightly against my face. If in doubt about how to adjust the goggles, I will immediately seek advice from a member of staff. I will only participate if at all times my safety goggles are held firmly against my face, If I lift or remove my safety goggles for any reason in the gun or game zones, I will be excluded from participating in the event and no refund nor any excuse accepted.

All participants will be given full instruction and the games, site rules, use of equipment and safety procedures. These rules are to ensure safe play and to maximise the enjoyment of all those taking part. I understand that failure to follow these rules may disqualify this individual or their group from continuing to participate in the games. No refunds will be given in such instances.

Occasionally the paintball centre and/or players will take photos and/or videos on site and/or keep various recored of the proceeding. I agree to allow such pictures/videos that may include me in them to be produced by such player and/or the paintball centre in all media together with commentary about the event that may or may not include details as the date and location of the event, the scores/results of any games and various associated comments.

I accept players are divided into teams at the managers discretion and although your wishes will be taken into consideration, their division is final.

For younger children, we request at least one adult/guardian should be in attendance to supervise their party for the full duration at Velocity Paintball.

Medical Disclaimer: I confirm that, I believe to be physically fit and able to participate in the game and recognise the game may require a high level of exertion. Please declare to the Centre Manager any illnesses such as asthma, heart diseases etc the may be aggravated by playing paintball.

Players Full Name:.....Date of Birth:.....

Mobile:.....

(Parent/Guardian's contact number)

Email:.....

(Parent/Guardian email)

House number/name:.....Postcode.....

Group Organiser:.....

Signature: _____ Date: _____
(Parent/Guardian please sign on behalf of child player)

Tick if you are the Parent/Guardian if signing on behalf of anyone under the age of 18 years of age.