Mobile Combaty Laser Tag Hold Harmless Agreement and Waiver

Each individual participant (or authorized guardian, if minor) must read and sign this release of liability prior to participating in any Mobile Combat Laser Tag event.

n order to participate in any Mobile Combat Laser Tag activity, I, the undersigned, agree and acknowledge that there is risk of injury from these activities and/or from the equipment involved.

I freely assume all such risks, both known and unknown, and assume full responsibility for my participation and safety.

I have read and understand the rules, including all safety-related rules, and agree to fully comply with all rules and regulations during my participation.

I, for myself, and on behalf of my heirs, assigns, personal representatives and next of kin hereby release and hold harmless Mobile Combat Laser Tag, LLC, their officers, officials, agents or employees, 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.

| Player's Name: | _ Age: | Date of Birth: |
|--|--------|----------------|
| Home Address: | | |
| Telephone Number: | | |
| Player's Signature: | | Date Signed: |
| Minor Age Participants (under age 18) | | |
| All participants under the age of 18 at the time of the event must have a parent or guardian sign below. | | |
| I hereby certify that I am the parent or guardian with legal responsibility for the above-signed participant and agree to his/her participation and release and hold harmless Mobile Combat Laser Tag, LLC, their officers, officials, agents or employees from any and all liability for his/her injury, disability, death, loss or damage to personal property. I acknowledge that I have read this release of liability in its entirety and assume all risk for the above-named minor and sign this release voluntarily and without inducement. | | |

Parent/Guardian Signature______ Date Signed:_____