

**ANTELOPE SPRINGS CHURCH**  
**Waiver and Release of Liability**  
(Please fill in all information and sign)

**Airsoft Ministry**

**I understand the following acknowledgements and guidelines:**

- I UNDERSTAND THAT AS A PARTICIPANT I AGREE TO FOLLOW ALL THE RULES AND REGULATIONS OF THE AIRSOFT MINISTRY AND THE STATE OF CALIFORNIA'S LAWS IN REGARDS TO SAFETY AND REGULATIONS FOR OWNING AND OPERATING AN AIRSOFT GUN.
- I HEREBY RELEASE ANTELOPE SPRINGS CHURCH AND ITS VOLUNTEERS FROM LIABILITY IN CASE OF AN ACCIDENT.
- I UNDERSTAND THAT VOLUNTEERS IN THE AIRSOFT MINISTRY DEPARTMENT WILL CARRY OUT ANY DISCIPLINE DEEMED NECESSARY. I ALSO AGREE, IF NECESSARY, THAT I WILL PAY THE EXPENSES OF MY ACCIDENTAL OR NEGLIGENT ACTIONS.
- I ALSO UNDERSTAND THAT WHILE THE VOLUNTEERS WILL DO ALL THEY CAN TO CARE FOR PERSONAL ITEMS, THEY WILL NOT BE HELD RESPONSIBLE OR LIABLE FOR STOLEN OR LOST ARTICLES.
- I UNDERSTAND THAT THERE ARE RISKS AND DANGERS IN AIRSOFT INCLUDING BUT NOT LIMITED TO INJURY, ILLNESS, OR DEATH.
- I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE AIRSOFT MINISTRY AND IT'S VOLUNTEERS FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

Participant Name (Print): \_\_\_\_\_

Legal Guardian (if needed, Print): \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_ Email: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ City: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone Number: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_