

GROUND ZERO ENTERTAINMENT INC.

O/A GROUND ZERO LASER TAG

Waiver Form



THIS IS A RELEASE OF LIABILITY-READ BEFORE SIGNING

THIS FORM MUST BE READ AND SIGNED BEFORE THE PARTICIPANT IS ALLOWED TO TAKE PART IN ANY GROUND ZERO LASER TAG EVENT

In consideration of being permitted to participate in any way in the sport and activities of Laser Tag under the auspices of GROUND ZERO LASER TAG, I acknowledge, appreciate, and agree that:

1. The risk of injury for the activity and equipment of GROUND ZERO ENTERTAINMENT O/A GROUND ZERO LASER TAG is insignificant, including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk of serious injury does exist;
2. I knowingly and freely assume all such risks, both known and unknown, even arising from the negligence of those persons released from liability below, and assume full responsibility for my participation; and,
3. I understand that the activities of Laser Tag are physically and mentally intense. I understand the rules of play and will comply with all the rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest official as soon as practical; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless GROUND ZERO ENTERTAINMENT O/A GROUND ZERO LASER TAG, the owners and lessors of premises used to conduct the Laser Tag activities, their officers, officials, agents, and/or employees ("releases"). With respect to any and all injury, disability, death or loss or damage to person or property, whether caused by the negligence of the releases or otherwise.
5. I understand and agree that this Release of Liability Agreement covers each and every Laser Tag activity and event in which I participate hereafter.

I _____ (parent / legal guardian) of _____ (name of participant) have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement and do authorize my legal dependant to participate in the events to be held on _____ (date of event). I am able to be reached at (_____) _____ - _____ during the event for any emergency situation.

Signature of Parent or Legal Guardian

*****THIS FORM MUST BE HANDED IN PRIOR TO EVENT STARTING TO ALLOW PARTICPANT TO BE INVOLVED*****