



## Registration Consent Form

For players Year 5 to 16 years of age - To be completed by parent or guardian

*I understand that I have agreed to allow my child to participate in the paintball event entirely at their own risk (recognising that there are hazards in the woods: fallen trees, sharp objects, trip hazards, holes, insects etc. and that paintballs can sometimes bruise or break the skin). I, on behalf of the player mentioned below, confirm that Yorkshire Paintball Ltd, trading as Yorkshire Paintball Centre, shall not be liable for any damage, cost or expense arising from his/her attendance at the paintball event, except in the respect of death or personal injury resulting from any omission or act of negligence.*

*All players will be given instruction on the game & site rules, use of the paintball 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 game. Refunds will not be issued in such circumstances.*

*I confirm and agree that the below mentioned participant understands that he/she must not remove their safety goggles anywhere outside the safe zone unless specifically instructed to do so by a member of staff. Only paintballs supplied by the Yorkshire Paintball Centre on the day of the event can be used.*

*I confirm that I believe my child to be physically fit and able to participate in the games and recognise that the game may require a high level of exertion. Please declare to the game manager any illness such as asthma, heart disease etc as these conditions may be aggravated by participation in paintball games.*

**Name of Participant**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Date of birth (Participant)**

--	--	--	--	--

 / 
 

--	--	--	--	--

 / 
 

--	--

**Address of Participant**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Game Date**

--	--	--	--	--

 / 
 

--	--	--	--	--

 / 
 

--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Age of Participant**

--	--

**Parent / Guardian Telephone Number**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**GDPR Consent and Opt In**

We would like to send you details of special offers via text message. We require your specific consent to do that. If you do not want any correspondence then please do not fill in your mobile phone number.

**Signature of Parent / Guardian** .....

**Date**

--	--	--	--	--

 / 
 

--	--	--	--	--

 / 
 

--	--

! INCOMPLETE, INCORRECT, OR ILLEGIBLE DETAILS WILL RESULT IN YOUR CHILD BEING UNABLE TO PARTICIPATE IN THE DAYS PAINTBALL GAME.



## Registration Consent Form

For players Year 5 to 16 years of age - To be completed by parent or guardian

*I understand that I have agreed to allow my child to participate in the paintball event entirely at their own risk (recognising that there are hazards in the woods: fallen trees, sharp objects, trip hazards, holes, insects etc. and that paintballs can sometimes bruise or break the skin). I, on behalf of the player mentioned below, confirm that Yorkshire Paintball Ltd, trading as Yorkshire Paintball Centre, shall not be liable for any damage, cost or expense arising from his/her attendance at the paintball event, except in the respect of death or personal injury resulting from any omission or act of negligence.*

*All players will be given instruction on the game & site rules, use of the paintball 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 game. Refunds will not be issued in such circumstances.*

*I confirm and agree that the below mentioned participant understands that he/she must not remove their safety goggles anywhere outside the safe zone unless specifically instructed to do so by a member of staff. Only paintballs supplied by the Yorkshire Paintball Centre on the day of the event can be used.*

*I confirm that I believe my child to be physically fit and able to participate in the games and recognise that the game may require a high level of exertion. Please declare to the game manager any illness such as asthma, heart disease etc as these conditions may be aggravated by participation in paintball games.*

**Name of Participant**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Date of birth (Participant)**

--	--	--	--	--

 / 
 

--	--	--	--	--

 / 
 

--	--

**Address of Participant**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Game Date**

--	--	--	--	--

 / 
 

--	--	--	--	--

 / 
 

--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**Age of Participant**

--	--

**Parent / Guardian Telephone Number**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**GDPR Consent and Opt In**

We would like to send you details of special offers via text message. We require your specific consent to do that. If you do not want any correspondence then please do not fill in your mobile phone number.

**Signature of Parent / Guardian** .....

**Date**

--	--	--	--	--

 / 
 

--	--	--	--	--

 / 
 

--	--

! INCOMPLETE, INCORRECT, OR ILLEGIBLE DETAILS WILL RESULT IN YOUR CHILD BEING UNABLE TO PARTICIPATE IN THE DAYS PAINTBALL GAME.