



# **BULLSWOOD SKIRMISH**

## **ENTRY FORM FOR UNDER 18 YEARS**

**PLEASE NOTE: MINIMUM AGE ALLOWED TO PLAY IS 10**

I, the undersigned, understand that I have agreed to allow (please print name)

..... child's name

(AGE ..... ) to play the game at their own risk. I recognise my child may be exposed to the following hazards:

1. The woodland has natural hazards such as fallen trees, dead branches, exposed tree roots, animal burrows etc.
2. Pellets from guns can bruise or break skin.
3. Not conforming to safety rules or removal of safety equipment at any time other than that clearly indicated by a member of staff will severely jeopardise safety.
4. If my child suffers from previous injury (Heart Disease, Asthma, twisted ankle, bad back etc.) I will recognise that paintball is an exciting and physical game and should I believe my child to be at additional risk I shall not let them play.

I understand that the above has been clearly stated and shall absolve Skirmish SE Ltd and the organisers from any liability.

**SURNAME:** \_\_\_\_\_ **INITIALS:** \_\_\_\_\_  
**PARENT/GUARDIAN**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TEL.NO:** \_\_\_\_\_