

**2011 MEDICAL RELEASE WAIVER
BAD KARMA AIRSOFT FIELD**

I/we being the legal guardians of _____, a minor, do hereby appoint BAD KARMA AIRSOFT (Mike Collinworth), to act on my/ our behalf in the event of an emergency or in the event that I/ we cannot be contacted, to authorize, offer or refuse necessary treatment while on the property of the Bad Karma Airsoft field.

I understand that I will be responsible for the payment of all costs incurred incident to such treatment. I will not hold Bad Karma Airsoft, Mike Collinworth, the owners, operators, participants, sponsors and all of their agents and employees responsible for any bodily, mental harm or omission that may arise from the participant utilizing the field, and I also agree not to hold responsible any of the above named for any outcome or omission that may arise from the offering of medical assistance to the participant.

I understand that there are no guarantees that trained medical staff will ever be on hand at any time and that any aid offered is done so strictly in the manner of a good samaritan.

Legal Signatures of all legal guardians and participant:

Legal Signature of participant (even if under 18)

Date

I wish this to be an open dated medical release waiver allowing the above person permission to play anytime they are at the BAD KARMA/ LEBANON Airsoft playing field during the current calendar season.

Legal Guardian / Participant Signature

Date ____/____/____.