



PLAYER APPLICATION

EACH PERSON MUST BRING A COMPLETED & SIGNED PLAYER APPLICATION

1. I, THE UNDERSIGNED WISH TO PARTICIPATE IN THE GAMES AT THE **XP LASER SPORT** MOBILE EVENT.
2. AS THE PARTICIPANT, I:
 - A. ACKNOWLEDGE THAT I AM ONLY AUTHORIZED TO PARTICIPATE IN A **XP LASER SPORT** MOBILE EVENT UPON THE PROPER EXECUTION OF THIS DOCUMENT.
 - B. HAVE READ THIS ENTIRE DOCUMENT AND COMPLETELY UNDERSTAND ITS CONTENTS. I ALSO ACKNOWLEDGE THAT ANY QUESTIONS ABOUT THE CONTENT OF THIS DOCUMENT HAVE BEEN ANSWERED BY A REPRESENTATIVE OF **XP LASER SPORT**.
 - C. ACCEPT ALL RESPONSIBILITY FOR PROPERTY DAMAGE TO THE EQUIPMENT AND PLAYING AREA CAUSED BY MY ACTIONS. I ALSO UNDERSTAND THAT THE TERM "EQUIPMENT AND PLAYING AREA" INCLUDES ANY BUILDINGS, LANDSCAPING, ALL FIXTURES IN AND AROUND THE SAME AND THE EQUIPMENT ASSOCIATED WITH IT.
 - D. ACKNOWLEDGE THAT THE OWNERS AND OPERATORS OF **XP LASER SPORT** HAVE EMPLOYED DILLIGENT EFFORTS AND CARE IN MAKING THE **XP LASER SPORT** MOBILE EVENT AS SAFE AS POSSIBLE; AND THAT DESPITE THE FOREGOING EFFORTS, I UNDERSTAND THAT THERE ARE, NEVERTHELESS, CERTAIN INHERENT RISKS IN PARTICIPATING IN A **XP LASER SPORT** MOBILE EVENT. AMONG THESE RISKS ARE POSSIBLY TRIPS, FALLS, COLLISIONS WITH OTHER PEOPLE OR OBJECTS, ETC. I SPECIFICALLY ACKNOWLEDGE THE EXISTENCE OF THESE RISKS AND AGREE TO PARTICIPATE IN A **XP LASER SPORT** MOBILE EVENT WITH THE FULL UNDERSTANDING OF SAME..
 - E. ACKNOWLEDGE THAT IF I OR MY PROPERTY ARE INJURED WHILE PARTICIPATING IN THE **XP LASER SPORT** MOBILE EVENT AS A RESULT OF THE INHERENT RISKS AND DANGERS MENTIONED ABOVE, I AGREE TO RELEASE, INDEMNIFY AND HOLD **XP LASER SPORT** OR ANY OF ITS EMPLOYEES, AGENTS, OR REPRESENTATIVES HARMLESS FROM SAID INJURIES OR ANY COSTS OR EXPENSES ASSOCIATED THEREWITH.
 - F. AGREE TO OBEY ALL RULES, REGULATIONS, AND INSTRUCTIONS GIVEN BY **XP LASER SPORT** REPRESENTATIVES EITHER BEFORE, DURING OR AFTER THE **XP LASER SPORT** MOBILE EVENT.
 - G. SPECIFICALLY AGREE TO ALLOW **XP LASER SPORT** TO EMPLOY ANY AUDIO, VIDEO, OR PHOTOGRAPHS TAKEN OF HIM OR HER DURING THE **XP LASER SPORT** MOBILE EVENT FOR PUBLICITY PURPOSES.
 - H. ACKNOWLEDGE THAT IF I AM UNDER THE AGE OF (18) YEARS, THAT I HAVE DISCUSSED THE TERMS AND CONDITIONS OF THIS DOCUMENT WITH MY PARENTS OR GUARDIANS, AND THAT MY PARENTS OR GUARDIANS, AFTER READING THE DOCUMENT, CONSENT TO ME SIGNING THE SAME AND, FURTHER, THAT I HAVE BEEN AUTHORIZED BY MY PARENTS TO AGREE TO THE SPECIFIC TERMS AND CONDITIONS CONTAINED HEREIN.

First Name: _____

Last Name: _____

Address: _____

City: _____ State: _____

Zipcode: _____ Date of Birth: ____/____/____

Telephone:(____) _____ Age: _____

E-Mail (Optional): _____

HAVING REGISTERED AS A PARTICIPANT AT THE **XP LASER SPORT** MOBILE EVENT, I ACKNOWLEDGE THAT THE GAMES AT THE **XP LASER SPORT** MOBILE EVENT IS A PHYSICAL ACTIVITY WHICH I JUDGE MYSELF FIT AND SUITABLY DRESSED TO PLAY. I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE WAIVER ON THE OTHER SIDE OF THIS FORM.

Signature of Player (Parent or Guardian if under 18)

Date



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Last Name: _____

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Zipcode: _____ Date of Birth: ____/____/____

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