



APL Series Waiver and Release of Liability

Venue: APL Series events will be held at Ashburton Paintball Park, owned by Ashburton Paintball Limited, or at another suitable location as deemed fit by the organisers.

Seasonal validity: This waiver is required to be completed only once by each participant per APL Series season and will apply to that participant's participation in all APL Series events during that season, unless the organiser requires an updated waiver because relevant circumstances or information have changed.

Participant Agreement

1. **Voluntary participation.** I choose to participate in the APL Series voluntarily and understand that I may stop participating at any time.
2. **Inherent risks.** I understand that paintball involves risks including being struck by paintballs, bruising, cuts, eye or hearing injury if approved paintball protective equipment is not worn correctly, slips, trips, falls, collisions, equipment failure, exposure to weather, uneven terrain, physical exertion, and the acts or omissions of other participants. Serious injury, permanent disability, or death may occur despite reasonable safety precautions.
3. **Fitness and disclosure.** I confirm that I am physically and medically fit to participate, or have obtained appropriate medical advice. I will disclose to the organiser any condition, injury, medication, allergy, or other circumstance that may affect my safe participation.
4. **Safety instructions.** The Team Representative will attend the Event briefing, I agree to follow all instructions, venue rules, and game rules, use equipment only as directed, and immediately report unsafe conditions, damaged equipment, or injury.
5. **APL Series rules.** I agree to adhere to the official APL Series rules as approved by the New Zealand Paintball Federation.
6. **Protective equipment.** I will wear approved eye and face protection whenever required and will not remove it in a playing area.
7. **Conduct.** I will not participate while impaired by alcohol, illegal drugs, or any substance that affects safe judgement. I will not engage in reckless, threatening, or deliberately harmful conduct. The organiser may remove me from the APL Series for unsafe behaviour without refund, subject to applicable law.
1. **Assumption of risk.** To the fullest extent permitted by law, I knowingly accept the inherent and ordinary risks of participating in the APL Series.
2. **Release and indemnity.** To the fullest extent permitted by law, I release the organiser, venue owner, operator, sponsors, contractors, staff, and volunteers from claims arising from my participation, except to the extent caused by conduct for which liability cannot lawfully be excluded. I indemnify those parties against loss or claims caused by my breach of this agreement or my negligent, reckless, or intentional acts.
3. **Non-excludable rights.** Nothing in this form excludes, restricts, or modifies any right or remedy that cannot lawfully be excluded, restricted, or modified, including any applicable rights under New Zealand law.
4. **Medical assistance.** If I am injured or become unwell, I authorise the organiser to provide first aid and obtain emergency medical assistance where reasonably necessary. I understand that I may be responsible for resulting costs to the extent permitted by law.
5. **Personal property.** I am responsible for my personal property. The organiser is not responsible for loss or damage except where liability cannot lawfully be excluded.
6. **Privacy.** I understand that personal and health information collected on this form may be used for event administration, safety, emergency response, insurance, and legal compliance, and may be disclosed where reasonably necessary for those purposes or as required by law.

Photo and Video Consent

I consent to the organiser capturing identifiable photographs and video of me. The photographic and video material will be used only for promotional purposes and will be made accessible to all participants. I understand and agree that this consent is a condition of entry to the APL Series.

Declaration and Signatures

I confirm that I have read and understood this form, have had the opportunity to ask questions, and agree to its terms. I understand that signing this form may affect my legal rights. As part of this declaration, I must provide a current driver licence or other approved photographic identification for verification.

Participant signature _____	Date _____
Printed name _____	Witness, if required _____
Identification type _____	Identification number _____

Parent or Legal Guardian Consent — Required for Participants Under 18

I am the participant's parent or legal guardian. I have read and understood this form, consent to the participant taking part, and agree to its terms on my own behalf and, to the extent permitted by law, on behalf of the participant. I confirm that the medical and emergency information supplied is accurate.

Guardian full name _____	Relationship _____
Guardian signature _____	Date _____
Guardian phone and email _____	Participant name _____

Organiser use: ID provided: ☐ Driver licence ☐ Other approved photographic ID ID sighted and verified:
☐ Yes Staff initials: _____ Date: _____