

**Teen Nerf War Liability Waiver  
(PLEASE READ BEFORE SIGNING)**

In consideration of Washington County Free Library furnishing services and/or equipment to enable me to participate in Nerf Battle and/or combat simulation, I agree as follows:

I fully understand and acknowledge that; (a) risks and dangers exist in my use of Nerf Battle equipment and my participation in combat simulation activities; (b) my participation in such activities and/or use of such equipment may result in my injury or illness including but not limited to bodily injury, disease strains, fractures, partial and/or total paralysis, eye injury, blindness, heatstroke, heart attack, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers or agents of Washington County Free Library and affiliates, suppliers, landowners, or distributors; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, employees of Washington County Free Library or by any other person.

**HOLD HARMLESS**

I, on behalf of myself, my personal representatives and my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify Washington County Free Library and it's owners, or distributors from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of combat simulation equipment or my participation in combat simulation activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers or employees of Washington County Free Library. I understand management, in its sole discretion, may terminate my participation at any time if I fail to abide by the rules, terms and conditions of participation. Management also reserves the right to modify or cancel activities at any time for any reason.

**COPYRIGHT MEDIA AND PHOTOGRAPH**

I further grant Washington County Free Library, its representatives and employees the right to take photographs of me and my property in connection with my participation in Nerf War. I authorize Washington County Free Library, its owners, agents, officers or employees to copyright, use and publish the same in print and/or electronically. I agree that Washington County Free Library may use such photographs and images of me with or without my name and for any lawful purpose, including as example such purposes of publicity, illustration, advertising, and Web content.

**MINORITY WAIVER**

I represent that I am the parent or legal guardian of the below individual and hereby consent to the individual using Washington County Free Library equipment and facility. In consideration for the below individual being allowed to use the Washington County Free Library equipment and facility I agree, personally and on behalf of the individual, to be bound by the terms and condition of this registration, release and waiver of liability. I further agree to indemnify, hold harmless and defend Washington

County Free Library from and/or against any loss, damage liability and expense, including but not limited to costs and attorney's fees, incurred by Washington County Free Library as a result of the below individual using Washington County Free Library equipment and facility.

Player name (First & Last): \_\_\_\_\_

Player Birthdate: \_\_\_\_\_

Player Email: \_\_\_\_\_

Player Signature: \_\_\_\_\_

**If player is under the age of 18:**

Parent/Guardian name (First & Last): \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Parent/Guardian Phone Number: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_