



HUNTER VALLEY PAINTBALL NEWCASTLE PTY LTD

ABN 56 680 098 346

C/O 32 LORD HOWE DRIVE

ASHTONFIELD NSW 2323

Mobile (0418) 492 924

PARENT/GUARDIAN CONSENT FORM

1. I am the parent/guardian of: _____

(child's full name)

a. Child's Details:

i. **Date of Birth:** _____/_____/_____

ii. **Address:** _____

_____ **Post Code** _____

2. I hereby give my consent for him/her to participate in the game of paintball at Hunter Valley Paintball Newcastle on
(date) _____/_____/_____ (time)_____.

3. I agree to delegate my authority to Hunter Valley Paintball Newcastle and its employees, servants or agents.

4. I confirm that he/she is of or over the age of twelve (12) years.

5. I note that the following person can be contacted on the above date and at the above time in case of an emergency:

Name: _____

Relationship to the child: _____

Phone number: _____

Mobile phone number: _____

6. I hereby acknowledge that I have read the Hunter Valley Paintball Newcastle Pty Ltd Release and Indemnity Form and I agree on behalf of my child to all of the conditions contained in it (excluding clause 9 of that Form). In particular, I note clause 7 of that Form and hereby warrant that my child is in good physical condition and has no disability, impairment or ailment which would prevent him/her from playing paintball or would be detrimental to his/her health, safety, conform or physical condition or to the health, safety, conform or physical condition of others while playing paintball or whilst at or near the designated playing field area.
7. I may be contacted on the phone number below to confirm my consent for my child to participate in the game of paintball at Hunter Valley Paintball Newcastle Pty Ltd.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Parent/Guardian Contact Phone: _____

Date: _____