



Newcastle Paintball HQ
181 Barrenjoey Road
Umina Beach 2257
Ph: 02 4340 2922

PARENT/GUARDIAN CONSENT FORM

Purpose of Consent: To allow participation in the sport of Paintball at Newcastle Paintball HQ

Date of Participation:

Delegated Organiser/ Supervisor(s):

Mobile Phone of Organiser/ Supervisor(s):

Childs Details:

Name (in full):

Date of birth:/...../.....

Disabilities (if any):

Allergies (if any):

Special food requirements or food disallowed (if any):

Student Medical Details:

Please detail any current medical conditions and treatment plans for your child, relevant to their participation in this sport.

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Emergency Contact:

Name: Relationship:

Phone:

Parental Consent:

As Parent/ Guardian of, I

hereby give my consent for him/her to participate in the paintball games at Newcastle Paintball Games and agree to delegate my authority to the delegated Supervisor(s) listed above. I understand that the Supervisor(s) have recognised that they have a duty of care for my child and have agreed to undertake full care and responsibility for the safety, well-being and organisation of my child and to follow my instructions regarding any disability, allergy, food requirements or food disallowed and/or any other medical concerns described above and, if they do that, and if they provide proper care, I hereby agree to indemnify them against any future liability for any accident or incident involving my child during the excursion whatsoever.

My Child is over 16 years of age.

Parent/Guardian Signature:

Parent/Guardian Name:

Parent/Guardian Contact Phone:

Date:/...../20.....