**REFORGER AIRSOFT ACTIVITY DISCLAIMER**

I have chosen to participate in the Airsoft activity (“the Activity”) arranged by Reforger Airsoft at Gt Westwood at entirely my own risk.

I have heard / read & understand all aspects of the safety Briefing.

I hereby release Reforger Airsoft at Gt Westwood & all members of its staff from all liability in respect of death,

illness, personal injury, accident or damage to persons or property or any other claim in connection

with the Activity howsoever this may arise or be caused.

I confirm that I am in good health and have not been in contact with anyone who has shown signs or symptoms of COVID-19 within the last 14 days. I also confirm I myself have not shown any signs or symptoms of Covid-19 withing the past 14 days.

Full Name: (PRINT)……………………………………………..………….......… Age: ………..

Signed: .............................................................................

Date: ……………………………………………………………..

**Reforger airsoft activity PARENT/GUARDIAN disclaimer**

I have chosen to allow my Child/Ward/(Child in my care) to participate in the Airsoft activity (“the Activity”) arranged by Reforger Airsoft at Gt Westwood at entirely my own risk.

I and [CHILD] have heard/read & understand all aspects of the safety Briefing

I hereby release Reforger Airsoft at Gt Westwood & all members of its staff from all liability in respect of death,

illness, personal/[CHILDS] injury, accident or damage to persons/ [CHILD] or property or any other claim in connection with the Activity howsoever this may arise or be caused.

I confirm that [CHILD} is in good health and has not been in contact with anyone who has shown signs or symptoms of COVID-19 within the last 14 days. I also confirm I myself have not shown any signs or symptoms of Covid-19 withing the past 14 days.

Full Name of PARENT/GUARDIAN : (PRINT)……………………………………………….......… Age: ………..

Relationship to child: …………………………………….

Signed: ......................................................................

Date: ………………………………………………...

CHILD Full Name …………………………………………………… Age: ……………