Terms and Conditions

Conditions of Entry:

You may NOT be eligible to play paintball if,

- You are or appear to be intoxicated by Drugs or Alcohol
- You are a Prohibited / Disqualified person
- You are Pregnant
- You have an injury or illness
- You are under the age of 15
- You are under the age of 18 and over the age of 15 and do not have a Parent of Legal Guardian permission to play
- You may not enter the arena with any knives, sharp objects or any items that may be deemed to cause injury to another person or damage to the Arena or Bunkers
- You do not leave any items that may be damaged such as mobile phones outside the arena.

Failure to disclose any information that may preclude from entry to the arena or presenting misleading information or documentation or Identification that is false or has been tampered with may result in legal action against you.

State Of Conflict staff reserve the right to refuse entry to any person.

Rules of Play:

- Paintball is a NON CONTACT sport, do not tackle, push, shove or make contact with another player.
- For your protection DO NOT remove your mask for any reason inside the arena. Being struck in the eye by a paintball may cause blindness.
- Do not shoot another person if less than 2 metres away from or at close range to, it will really hurt and more than likely cause the person injury.
- The arena is for Paintball it is not a bouncy castle, DO NOT climb, jump onto or attempt to move any of the bunkers or arena, this may cause damage.
- DO NOT place any item (besides approved new paintballs) or pick up used paintballs from the ground and place them inside your marker, placing objects other than new paintballs into the marker may cause damage to the marker.
- DO NOT shot at the Marshals, they do not like it when they can’t shot back.

Any breach of the rules may result in you being evicted from the arena, if this is the case you will not receive a refund. State Of Conflict may further take possible legal action against you or contact the Police.

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Customer Information

Surname: ____________________________________________________________

First: ____________________________________________ Middle: __________________________

Date of Birth: / / Age: _________ Gender: __________________________

Address:

Number: _________ Street: __________________________________________

Suburb: ___________________________ Post Code: ________________________

Contact Number: ____________________________________________________

Email Address: ______________________________________________________

Type of ID supplied:

Drivers Licence ☐ Number: _____________________________

Proof of Age ☐ Number: _________________________________

Birth Certificate ☐ Number: _________________________________

Other ☐ Type & Number: ____________________________________________

Illness or Injury: ____________________________________________________

Eg. Asthma, Heart Condition

______________________________________________________________

Parent or Guardian

Name: ____________________________________________________________

Relationship: ____________________________ Contact Number: _______________________

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Indemnity & Acknowledgment

I have read and understand the “Conditions of Entry” and the “Rules of Play” and agree to abide by them. I have disclosed all the information asked of me and the nature of any illness, injury or pregnancy I have or may have.

I am not impaired by Drugs or Alcohol and understand that I can not be during my time at State Of Conflict.

I am not a Prohibited / Disqualified person as defined by the Weapons Act 1990.

I understand that being struck by a paintball may cause me pain or discomfort, it may also cause bruising or the breaking of the skin and by signing I agree to accept such injuries.

I agree that State Of Conflict and its employees are not responsible for any injury received to me or any damaged caused to property in my possession.

I am over the age of 18 or I am over the age of 15 and have permission from a Parent/Guardian to play paintball.

I agree that State Of Conflict is not responsible for the actions of other people playing paintball which include any injury or damage to property caused by them to the customer.

Signature: ______________________________________________________________

Print Name: ______________________________________________________________

Date: _______/_______/____________

Witness:

I the witness am a Parent or Legal Guardian of the above mentioned, I have read and understand the “Conditions of Entry” and the “Rules of Play” and consent to the above named person to participate in paintball activities with State Of Conflict.

Signature: ______________________________________________________________

Print Name: ______________________________________________________________

Date: _______/_______/____________