



Registration Form

Pre-Registration Day of Event

Date: _____

Name:	DOB:
Address:	City, State, Zip Code:
Email:	Church (Optional):
Open Event Pricing: (<i>Black Friday Open, GrownOPS, etc.</i>) (write in values)	
<input type="checkbox"/> General Admission (\$_____ Pre-Registration , + \$_____ Day of Event) _____ (GA includes, unlimited CO ₂ , & T-Shirt (circle): S M L XL)	
<input type="checkbox"/> Equipment Rental: \$10.00 mask & marker (Tippman 98) + _____	
<input type="checkbox"/> Estimated Paint Needs (estimate not required, but helpful): _____ cases + _____ (\$60 per case (2000), \$35 per half case (1000), \$18 per 500)	
Total: \$ _____ (checks made payable to Haycock Camping Ministries)	
Rental Group Pricing: (<i>Weekend Rentals or Rental Group Add-On</i>) (write in values)	
<input type="checkbox"/> General Admission: \$39.00 per person _____ (GA includes field fee, marker, mask, unlimited CO ₂ , 500 paintballs)	
<input type="checkbox"/> Additional Paint (estimate not required, but helpful): _____ cases + _____ (\$60 per case (2000), \$35 per half case (1000), \$18 per 500)	
<input type="checkbox"/> Cook-out Meal: \$5.00 per person (1 burger or 2 hotdogs, chips, drink) + _____	
Total: \$ _____ (checks made payable to Haycock Camping Ministries)	
Credit Card Payment: VISA / MasterCard / Discover (circle one)	
Card#: _____	Card Holder: _____
Exp Date: _____	3Digit Code: _____
Amount: \$ _____	Signature: _____
Billing Address: _____	

Ops Rules: (We are keeping it simple for you...there are more rules that will be shared at the event)

1. Player agrees to observe the principal of treating all other people, equipment, and facilities in the manner in which they wish to be treated. (Matthew 7:12)
2. Player acknowledges that the Haycock Ops Staff and Game Referees are in charge of all Ops facilities, equipment, and gameplay, and player will follow their direction at all times.

Waiver of Liability: I hereby acknowledge my willing and voluntary participation in Haycock Ops paintball activities. I accept the inherent risks associated with such activities, including any emergency medical care I may receive at the discretion of Haycock Staff and their agents. I hereby release and hold harmless Haycock Camping Ministries, its staff, directors, and agents as well as fellow participants, from liability or any damages associated with respect to any and all injury, disability, damage, or loss to person or property, whether caused by negligence or otherwise.

I have read and understand the *Haycock Ops Rules* and *Waiver of Liability* and agree to abide by the terms of each.

Player Signature: _____ **Date:** _____

(If player is under the age of 18, an additional signature must be provided by parent or legal guardian)

Mail completed registration & payment to 3100 School Road, Kintnersville PA 18930 or fax to 610-346-8927 or email to ops@haycock.org (fax/email may be used for credit card payments only).