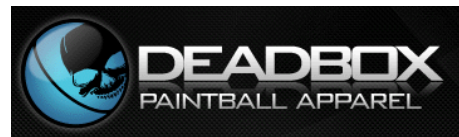


Sponsors List



COSTS & FEES

Pre Registration rate Information
GAME MAXIMUM 350 Players Register Early

Registration rates
 \$45.00 per person no refunds Pre registration by DEC 31st 2011 Midnight:
 \$50.00 per person no refunds Pre registration by FEB 12th 2012 Midnight:
 \$60.00 per person no refunds. after Feb 12th 2012
 60.00 starting Feb. 13th
 All weekend Event Air \$10.00 HPA and Co2

Event Paint Only SATURDAY and SUNDAY

* Pre game Play BYOP Friday ONLY.....

SCHEDULE

FRIDAY, FEBRUARY 24th
 The field house will be open on Friday from 9:00am until 8:00pm for registration, chrono, paint, early check in and camping arrivals.
 Special "General's" pre Event surprise.

SATURDAY, FEBRUARY 25th
 7:00 am Registration & Chronograph Opens
 9:30 am Mandatory Safety Briefing
 11:00 am Game On!
 5:00pm – 7 pm Dinner
 8:00pm Game Resumes
 10:00pm Night Game Over

SUNDAY, FEBRUARY 26th
 7:30 am Chronograph Opens
 9:00 am Game On!
 1:00 pm Game Over
 1:30 am Winners announced and prizes awarded



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For information on: Registration / Waivers / Field Maps

Visit Website: <http://www.abpaintball.com>

" ROAD to No Ends" The Plague" Registration Form

FAX ORDER FORM FAX to: 843-399-2715

Event Date: Feb 24, 25th & 26th 2012

Please complete the follow form and fax in with your wavier

Wavier can be found at: <http://www.abpaintball.com/pdf/paintwaiver.pdf>

Wavier or Waivers: Must accompany Pre Registration Fax in order.

First Name: _____ Last Name: _____

Address: _____

City: _____ HOME PHONE : _____

State: _____ CELL PHONE: _____

Zip Code: _____ FAX PHONE: _____

Credit Card Information: Visa _____ MasterCard _____ AMX _____

Name on Card _____

Card Number: _____ Visa & MC ONLY

Expiration date: _____

Verification Number _____ 3 digit # on back of card Visa & MC

Billing Zip Code: _____ Credit Card Billing Address: if different than above

Address: _____

City: _____ CC BILLING PHONE # : _____

State: _____ Zip Code: _____

Team Name: _____ HOW MANY PLAYERS: _____

Which Side do you want to play? _____

Wavier or Waivers: Must accompany Pre Registration Fax in order.

Items:

Game registrations: QTY _____

45.00 Pre Registration (EARLY Pre. Reg. ends DEC 31st 2011)

50.00 Pre Registration (Pre. Reg. ends Feb 12th 2012)

60.00 Registration (Reg. Starting Feb 13th 2012)

Game registrations: QTY _____

Total Amount: _____ Charged to Credit Card

Signature: _____ Date: _____

[Http://www.abpaintball.com](http://www.abpaintball.com)

RETURN FAX to: 843-399-2715

Any question please email. info@abpaintball.com



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LODGING INFORMATION:

Camping is available with plenty of space at the field.

TEAMS and Groups Reservation Company

www.myrtlebeachtours.com

Call 877-500-6569

Super 8 in North Myrtle Beach

843-249-7339

Comfort Inn in North Myrtle Beach

843-249-2490

Quality Inn in North Myrtle Beach

843-272-6153



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Recreational Activity Release of Liability, Waiver of Claims, Express Assumption Of Risk and Indemnity Agreement Adventure Beach Paintball

Express Assumption of Risk Associated with Recreational Activities.

I, _____ hereby affirm and acknowledge that I have been fully informed of the inherent hazards and risks associated with the recreational activity generally described as **Paintball/Airsoft/Laser Tag**, including the rental of equipment and transportation associated therewith of which I am about to engage in. Inherent hazards and risks include but are not limited to:

1. Risk of injury from the activity and equipment utilized is significant including the potential for permanent disability and death.
2. Possible equipment failure and/or malfunction of my own or other's equipment.
3. This activity takes place outdoors and therefore includes risks associated with exposure to elements, excessive heat, hypothermia, impact of the body upon the water, injection of water into my body orifices, encountering objects either natural or man-made, exposure to animals with the attendant risks of kicking, biting, shying away, running off or otherwise moving in an unanticipated manner causing injury and/or death.
4. My own negligence and/or the negligence of others, including but not limited to operator error and guide decision making including misjudging terrain, rapids, weather, trails, and route location.
5. Attack by or encounter with insects, reptiles, and/or animals.
6. Accidents or illness occurring in remote places where there are no available medical facilities.
7. Fatigue, chill, and/or dizziness, which may diminish my/our reaction time and increase the risk of accident.

***I understand the description of these risks is not complete and that unknown or unanticipated risks may result in injury, illness, or death Release of Liability, Waiver of Claims and Indemnity Agreement**

In consideration for being permitted to participate in the activity(ies) described above the related activities, I hereby agree, acknowledge and appreciate that.

1. I HEREBY RELEASE AND HOLD HARMLESS WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY NEGLIGENCE OR OTHERWISE, the following named persons or entities, herein referred to as releases.
2. To release the releasees, their officers, directors, employees, representatives, agents, and volunteers, and vessels from liability and responsibility whatsoever and for any claims or causes of action that I, my estate, heirs, survivors, executors, or assigns may have for personal injury, property damage, or wrongful death arising from the above activities whether caused by active or passive negligence of the releases or otherwise. By executing this document, I agree to hold the releasees harmless and indemnify there in conjunction with any injury, disability, death, or loss or damage to person or property that may occur as a result of engaging in the above activities.
3. By entering into this Agreement, I am not relying on any oral or written representation or statements made by the releases, other than what is set forth in this Agreement. This release shall be binding to the fullest extent permitted by law. If any provision of this release is found to be unenforceable, the remaining terms shall be enforced.

This release shall be binding to the fullest extent permitted by law. If any provision of this release is found to be unenforceable, the remaining terms shall be enforced.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, AND I FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP LEGAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

(Signature of Adult Participant)

(Name of Participant, PRINT ONLY)

(Address)

(City)

(State)

(Zip Code)

(Phone Number)

(E-mail)

(Date of Birth)

(Date)

For Participants of Minority Age, this is to clarify that I, as Parent, Guardian, Temporary Guardian with legal responsibility for this participant, do consent and agree not only to his/her release of all releasees, but also to release and indemnify the Releasees from any and all liabilities incident to his/her involvement in these programs for myself, my heir, assigns, and next of kin.

(Signature of Parent or Legal Guardian)

(Name of Parent or Adult Legal Guardian PRINT ONLY)

If participant is a minor, and by their signature
They on my behalf release all claims that both
They and I have)

(Name of Minor PRINT ONLY)

