

SPRING BREAK PAINTBALL FUN APPLICATION

APRIL 2019

PLAYERS INFORMATION:

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

PHONE #: _____

EMAIL: _____

ALLERGIES: _____

IF YES, DOES YOUR CHILD CARRY AN EPI-PEN? _____

SPECIAL INSTRUCTIONS:

EMERGENCY CONTACT:

1.NAME: _____ PHONE #: _____

RELATIONSHIP: _____

2.NAME: _____ PHONE #: _____

RELATIONSHIP: _____

LIST ALL PEOPLE WHO WILL BE PICKING YOUR CHILD UP

NAME/PHONE #/RELATIONSHIP

We try to take pictures of the players throughout the week. Would you like the pictures of your child texted to you?

If yes, please provide phone numbers: _____



EXPERIENCE LEVEL:

PLEASE CHECK ONE

NEW_____ BEGINNER _____ NOVICE _____ ADVANCED_____

NEW= NEVER PLAYED PAINTBALL BEFORE

BEGINNER= HAS PLAYED ONCE OR TWICE

NOVICE= KNOWS BASIC SKILLS, HAS PLAYED A FEW TIMES

ADVANCED= HAS A STRONG KNOWLEDGE OF THE GAMES AND SKILLS. HAS PLAYED MANY TIMES.

\$329 FOR THE WEEK

DEPOSIT OF \$29 IS DUE TO HOLD YOUR CHILD'S SPOT.

BALANCE IS DUE ON 4/10/19

CREDIT CARD ☐ CHECK ☐ #_____ CASH ☐_____

#_____ EXP:_____

CVV:_____ BILLING ZIPCODE:_____

AMOUNT TO BE CHARGED:\$_____

SIGNATURE:_____

MAIL TO:

MSG PAINTBALL

1934 ROUTE 211E

MIDDLETOWN, NY 10941

MSG PAINTBALL FIELD

BART BULL ROAD | MIDDLETOWN, NY 10941

845-457-4678

MSGPAINTBALL@AOL.COM