

Oxford Axe Throwing Application Form

Name: _____

D.O.B: _____

Address: _____

Email: _____

Cell No: _____

Emergency Contact: Name: _____

 Phone: _____

Copy of drivers license provided _____

Yes No

I agree that Oxford Axe Throwing may contact me via email with regard to events, specials, appointment reminders, etc.

I agree that Oxford Axe Throwing may contact me via text message with regard to events, specials, appointment reminders, etc. I understand that usage or data rates may apply.

Oxford Axe Throwing

Fee schedule with designated membership fee

\$25 for the first hour. \$15 for the second hour. Two hour Max.

*Second hour must be booked in advance

A one time \$10 membership fee.

Membership period is for one year.

Membership includes Oxford Axe Throwing t-shirt.

If participant has visited 5 or more times with in one year, membership fee is waived for the following year.

Oxford Axe Throwing

Membership Agreement

This membership agreement is accepted and agreed to by member. The acceptance by the member of this agreement extends to the members, members representatives, members heirs, members agents, administrators, executors, trustees and assigns.

This membership gives you access to the facility for one year after signing the membership agreement/liability waiver. Membership expires after one year of signing.

I understand that Oxford Axe Throwing, assumes no responsibility for physical or emotional injury, death, property damage, expense, and/or loss which I may sustain as a result of participating in axe throwing or other events at the facility or which may occur upon the premises of Oxford Axe Throwing, during, while participating in, or subsequent to any activity at the premises due to any cause, including but not limited to, willful misconduct, negligence, gross negligence, breach of duty, and failure to protect me from the risk and hazards of participating in ax throwing or other activities on the premises.

I hereby expressly and voluntarily RELEASE AND FOREVER DISCHARGE Oxford Axe Throwing and agree to indemnify and hold them harmless from any and all claims for injury, illness, death, loss or damage which I may suffer as a result of participation in these activities at Oxford Axe Throwing. I agree to release Oxford Axe Throwing from any liability for other claims, including loss of property, to the fullest extent of the law. This release and indemnification agreement shall be as broad and inclusive as permitted by the law of the State of Connecticut. If any portion of this membership agreement is held to be invalid, the balance of the agreement shall continue in full force and effect.

I acknowledge and understand that Oxford Axe Throwing and its owners, directors, officers, volunteers, representatives and agents are NOT responsible for the errors, omissions, acts or failures to act of any party including other members who are participating or spectating at the facility.

I hereby agree to indemnify and hold harmless from and against all losses, liabilities, claims, costs, damages and/or expenses whatsoever paid, incurred and/or suffered by Oxford Axe Throwing, including, but not limited to, any and all attorney fees, costs, damages or judgments Oxford Axe Throwing incurs in the event that I cause any injury, damage and/or harm to Oxford Axe Throwing and/or any and all other persons or entities against Oxford Axe Throwing. I will indemnify, save and hold harmless Oxford Axe Throwing from any litigation expense, attorney's fees, loss, liability or costs, damages or expenses which may result from such claim.

I fully understand that Axe Throwing is a form of physical exercise and is associated with certain risks.

I fully understand and acknowledge that Ax Throwing is risky and dangerous and that there is a possibility that personal injury, death, property damage and other losses may result from engaging, participating and viewing this type of activity.

In an emergency, I authorize Oxford Axe Throwing to administer first aid by trained staff and to obtain emergency medical treatment for me. I accept responsibility for all fees incurred in the care and transportation by ambulance to the Hospital Emergency Room in the event that Oxford Axe Throwing requests an ambulance for me.

I understand that Oxford Axe Throwing is not responsible, nor liable for personal property lost or stolen while members are using the facility or on the premises. I hereby discharge, release and waive Oxford Axe Throwing from any and all liability for lost or stolen merchandise.

I give my permission to Oxford Axe Throwing to use, without limitation or obligation, any photographs, videos and/or tape recordings of which may include my image or voice unless I notify Oxford Axe Throwing in writing prior to participation at Oxford Axe Throwing.

I understand that Oxford Axe Throwing may suspend or terminate my membership without any liability for failure to adhere to the terms of this agreement, for violation of the facilities policies, for violation of the facilities code of conduct for violation of the facilities rules and procedure and that the Oxford Axe Throwing shall further be authorized to suspend or terminate my

membership agreement in the event that Oxford Axe Throwing determines that my conduct is unsportsmanlike, poses a danger to the safety and wellbeing of other members or my behavior is disruptive to other members. The decision of Oxford Axe Throwing to suspend or terminate my membership is at the sole and absolute discretion of the management/owners of Oxford Axe Throwing.

As a Member I agree and consent to Oxford Axe Throwing inspecting coolers and other personal property that I bring into the facility in order to confirm compliance with the rules and regulations of Oxford Axe Throwing.

I agree to abide by all rules and regulations of Oxford Axe Throwing and that I have been provided with a copy of the rules and regulations.

By signing this membership agreement the member confirms and agrees that member has read and fully understands the terms of this agreement. I acknowledge that this agreement has been voluntarily signed, I have had sufficient opportunity to read and understand this entire document and consult with legal counsel, or have voluntarily waived my right to do so. I knowingly and voluntarily agree to be bound by all terms and conditions set forth herein.

Member:

Date: _____

Membership Period: _____ to _____.