

ASSUMPTION OF RISK AND LIABILITY AGREEMENT Student Name Birth Date Parent Name(s) if student is a minor under 18 AUTHORITY TO TREAT I, the undersigned, give the instructors, staff and responsible adults the power to authorize medical or other treatment of the person named above under "Student Name," subject to the limitations listed below, if any. If I am not the person so named, I am the parent, guardian or adult responsible for the person named, and I have the legal right to grant this power. Treatment may be made without regard to whether I or any other parent, guardian, or adult responsible has been contacted or has consented to the specific treatment, provided it does not conflict with the limitations outlined below. This authority begins on the date signed and continues indefinitely. Limitations to Treatment Information of Medical Significance By giving my authorization, I assume responsibilities for all decisions made, provided they are reasonable decisions under the circumstances based upon the knowledge and understanding of the person making the decisions, and I trust their judgment and offer the benefit of the doubt to them in any claim or legal proceeding. This presumption may only be overcome by clear and convincing evidence that they acted with malice or willful gross negligence, and, if so they may still be liable. Signature Date Print Name Relationship (if other than self) I understand that the instructors, senior students, or others may have some skills in first aid, CPR, and, at their discretion, I authorize them to use those skills and techniques to assist in any circumstance in which they judge their skills would be necessary or helpful. Initials Initials

ADVISORY OF RIGHTS AND RESPONSIBILITIES

Safety is not the sole responsibility of instructors and staff. Everyone in class is responsible for their own safety and the safety of those around them.

All students have the right and responsibility to excuse themselves from any exercise they believe will be harmful to them. All students must evaluate each situation in the context of their skill and current physical condition, and conduct each drill in a manner that is safe. If an instructor gives an instruction that is unsafe for the student, it is the student's responsibility to inform the instructor that the skill may be unsafe. The instructor will routinely excuse the student from unsafe exercises and drills. The instructor may ask for an explanation, and the student is expected to provide one.

All students have the responsibility to train and conduct themselves in a manner that helps all students and instructors to remain safe. Students must give those who are training enough room to avoid interfering with, and avoid being accidentally struck by, someone else practicing, which is especially important when others are practicing with weapons.

In the event of an injury, students have the right and responsibility to evaluate the extent of harm. stopping what they are doing even if it includes a partner, and determining that it is safe to continue. Unless a student is certain that farther practice will not create or worsen a problem. all students are encouraged to stop what they are doing and inform an instructor. In the event a serious injury, or appearance of a serious injury, all students, instructors, staff and visitors,

notably parents, have the rig	t to calla stop to a particular training exercise.
incorrectly, a student not bei potentially dangerous obstact harm of students, instructors situation if within his ability simple to correct, such as pic situation. If the situation ma	aining situation which may include a student performing a skill g careful about others, a defect in a piece of training equipment, a e or condition on the floor, or anything else that may cause or lead to staff, visitors or guests, then the student is expected to correct the or notify an instructor or staff member immediately. If something is ting up a weapon left on the floor, the student should correct the require the authority of the instructor, or staff, or if it is not a simple aff member should be notified immediately.
Initials	Initials
soreness are commonplace, a time in their training. More s and injuries of similar magn. The possibility of more serio though not all students encou	ntially dangerous activity. Bumps, bruises, scrapes, scratches, and and most students will encounter this sort of minor injury from time to rious injuries are possible, including sprains, strains, twists, cramps, and the Students can expect to encounter these injuries infrequently, is injury exists, including fractured/broken bones, torn ligaments, after serious injuries. There remains, despite safety precautions, thing or death, though this is certainly not expected in this class.
students. I assume responsib and accepting the risks invol that no serious injuries have understand that this does not completely absolve all instru	ent of risk, and I understand the rights and responsibilities of ity for my own safety (or the safety of my child), understanding ed with combatives training. Even if the instructor has informed me ver happened in this facility or with any of the instructors, I mean that there is no possibility of harm. By assuming this risk, I tors, staff, students guests, visitors, landlords, management her parties of liability for my harm, unless intentionally caused in
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NOTICE AND CONSENT TO INSTRUCTORS

This combatives class seeks to make use of highly trained, professional instructors, with both expertise and experience both in the arts we teach and in teaching. The head instructor or any other qualified instructor may teach classes. Should an instructor be unavailable for a given class, a junior instructor, senior student, or guest instructor may teach. The choice of the instructor is is left to the discretion of the head instructor.

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whomever is teaching, to show the and to conduct myself in accordan that I have the responsibility for m specifically consent to any instruc	s have the instructor I desire, but I shall seek to learn from a respect due the position of teacher to whomever is teaching, and with the etiquette established at this class. I understand may own safety without regard to who is teaching the class. I tor that the head instructor feels is sufficiently qualified by any s. I specifically understand and agree that the full force of this is teaching.
Initials	Initials
NOTICE OF PHYSICAL CONT	ГАСТ
students may have contact with an strikes, and grabs. The chest, butto part of the training partner's body	olves a wide variety of skills. While practicing these skills, by potion of the body. The groin may be the target of kicks, bocks, groin or any part of the body may be contacted by any during training by martial arts/ combative techniques, or rming a technique targeting another portion of the body.
and in any other training combinatis to provide an environment for a	ain together, or when adult and minor students train together, tion, the purpose and intent of the class, instructors and staff ll students to learn and practice martial arts/combatives training. themselves appropriately at all times to ensure the best
a training partner is taking undue a is made uncomfortable by any trai withdraw from the exercise or dril student should inform an instructo	partner is engaging in contact beyond the scope of training, or and unacceptable advantage of training contact, or if a student ming exercise or partner, then that student has the right to al. If the conduct of the training partner appears inappropriate, the privately. If the conduct of the training partner or any training instructor should be informed and the authorities may be e instructor, or both.
Initials	Initials
CONSENT TO PHYSICAL CO.	NTACT
the right to immediately withdraw seems beyond the scope of training etiquette in all matters pertaining t	I contact in combatives training, and I understand that I have from any exercise or drill in which the conduct of any party g or makes me uncomfortable. I agree to abide by school to training, and I shall not in any way conduct myself priate advantage of the contact combatives training allows.
Initials	Initials

ADVISORY OF MEDICAL EXAMINATION AND PHYSICIAN ADVICE

Because martial arts and firearms training is a physically based, athletic activity, participants must be in reasonably good health and physical condition. Those who are not in reasonable good health and physical condition due to age, illness, disability, infirmity, or any other reason, should not participate in such activity. Before undertaking such an activity, a student (or parent of a student) is advised to obtain a physical exam of the student by a qualified physician and to seek a physician's advice regarding whether or not the student should participate in such activity. If a student suffers from any type of ongoing or recurrent medical problem or physical limitation it is essential that the student seek the advice of a physician before engaging in martial arts/firearms.

I understand the above statements, particularly that I should obtain a physical examination and physician's advice as to whether or not I should engage in martial arts/firearms activity. If I am a parent of a minor child enrolling in the class, I understand that my child should receive a physical examination and physician's advice as to whether or not my child should engage in martial arts or firearms activity. I understand and agree that I assume any and all risks of any injury and harm that may result from my failure to both obtain a physical exam and a physician's advice for myself (or for my child if a parent) before I (or my child) undertake martial arts/firearms training. Further, I agree to completely absolve all instructors, staff, students, visitors, guests, landlord, management companies, and any other parties for any injury or harm I (or my child if a parent) may receive as a result of my failure to obtain a physical exam or physician's advice for myself (or my child if a parent).

By participating in martial arts/firearms activity, I am certifying that I am in reasonably good health and physical condition and am capable of taking part in such activity, regardless of whether or not I have received a physical exam or sought the advice of a physician. If I am a parent of a child participating in martial arts/firearms activity, I am certifying that my child is in reasonably good health and physical condition and is capable of taking part in such activity, regardless of whether or not my child has received a physical exam or sought the advice of a physician.

regardless of whether or not m physician.	y child has received a physical of	exam or sought the advice of a
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INDEMNIFICATION BY PA Applicable only to Parents E	· · · · · ·	
any other parties on behalf of r criminal act, and then only the will not cause to be brought, no	my child for any injury or harm criminal shall be the subject of or encourage, a claim or a suit. In except insofar as I may be legal	aff, guests, students, landlords, or sustained by any event short of a such a claim. I further agree that I I also agree not to cooperate in the ally required to do so. Finally, I shall
Initials	Initials	

ARBITRATION CLAUSES

Should any dispute arise between me, my child, or anyone acting on behalf of my child, regarding this class, then I specifically agree that the dispute shall be resolved in binding arbitration. Should a suit be filed in Court, I specifically authorize the Court to order the case to binding arbitration.

SEVERABILITY

If any clause, sentence, phrase, or statement is found unenforceable or invalid by any Court of law, the remainder of the document shall remain valid and enforceable, and the invalid clause, sentence, phrase, or statement shall be considered struck from the document.

DURABILITY

Parent Signature

This document is effective from the date signed with no expiration. Furthermore, the terms of this document are retroactive to the beginning of training and visiting the class if this document was signed after that date.

I have read this document in its entirety, and I understand the complete content of it.

Student Signature

For Minor Students Only:

Date

Date

Date

Date