

FIGHTING FOR FILM WAVIER

Name _____ Date of Birth _____

Email Address _____

Please state any physical problems/limitations that may interfere with participation at this time:

READ CAREFULLY – RELEASE & WAIVER OF YOUR LEGAL RIGHTS

For and in consideration of my being accepted as a participant in the Mentoring Advanced Combatants Intensive, I intending to be legally bound, hereby for myself, my heirs, executors, and administrators, waive and release any and all rights to damages or claims I may have against the intensive teachers, coordinators, or facility used by the participant, including its owners, managers, promoters, lessees of premises used to conduct the stage combat event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions or instructions to engage in risk evaluation or loss control activities regarding the facility or events held at such facility and each of them, their directors, officers, agents, employees for injuries or rights to damages suffered by me, directly or indirectly as a result of attending, participating in, practicing for, traveling to or from such classes or examinations, or demonstrations, or against the owners, organizations, or members of the gymnasium, club, school, or place where held. I fully understand and acknowledge that there are risks and dangers associated with participation in stage combat events and activities which could result in bodily injury partial and/or total disability, paralysis and death. I fully understand and acknowledge that the social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe. Therefore, I expressly assume all risk and hazard from participating in this program. I will make a conscious effort to take care of all the people I train with during the program, and I understand that all of the movements I perform and /or allow performed upon me during the program are performed by my own choice. I will also take full responsibility for my health and actions during the course of this program.

I HEREBY RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS AND COVENANT NOT TO SUE the aforementioned parties or any other person from liability whereas caused by these parties negligence, accident, or any other causes for any injury I sustain by participating in this program. Provided however, this release shall be ineffective as to any injury caused by intentional conduct or gross negligence only.

Signature of Participant

Date