



**UNITED STUDIOS OF SELF DEFENSE – Millcreek & Salt Lake City
PERSONAL PROTECTION PROGRAM – Waiver**

STUDENT INFORMATION

Name _____ Age _____ Date of Birth _____
Address _____ City _____ Zip _____
Email _____ Phone # (_____) _____
Emergency Contact _____ Phone # (_____) _____
Parent or Guardian _____ Phone # (_____) _____

PHOTO, DIGITAL & PRINT MEDIA RELEASE

I grant permission to ACF SERVICES LLC. dba United Studios of Self Defense, (the "Studio") and its agents or employees, to use Photographs taken of me or my minor child(ren) in classes or events of the Studio for use in publications such as brochures, newsletters and magazines and to use the photographs on display boards and to use such photographs in electronic versions of the same publications or on the Studio's website or other electronic form of media, and to offer them for use or distribution in other non-company publications, electronic or otherwise, without notifying me.

I hereby waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right or royalties or other compensation arising from or related to the use of the photograph.

I hereby agree to release, defend and hold harmless the Studio and its agents or employees, including any firm publishing and/or distributing the finished product in whole or in part, whether on paper or via electronic media, from and against any claims, damages or liability arising from or related to the use of the photographs, including but not limited to any misuse, distortion, blurring, alteration, optical illusion or use in composite form, either intentionally or otherwise that may occur or be produced in taking, producing, reduction or production of the _____ finished product, its publication or distribution.

ASSUMPTION OF RISK

For valuable consideration and to induce permission to participate in the martial arts instruction offered by ACF Services LLC, dba United Studios of Self Defense, (the "Studio") and/or United Studios of Self Defense, Inc. (the "Company" and/or "USSD"), each of the undersigned agrees to the following terms and conditions and each make the following warranties:

I acknowledge that the martial arts constitutes as a HAZARDOUS RECREATIONAL ACTIVITY which carries with it significant RISK of damage or PERSONAL INJURY, or DEATH to any person or property. Such hazards include cuts, abrasions, fractures, and trauma to any part of the human anatomy including head, back, neck, spinal cord. These injuries may occur as a result of falls, strikes, kicks, punches, equipment failure, bad decision making, negligent or inattentive fellow participants instructors, or assistant instructors. I understand that this is not a complete description of all risks inherent in my (or my child(ren)'s) participation in the martial arts, and that other unknown or unforeseeable hazards and risks of harm may occur.

With this in mind, I accept full responsibility for my own safety, as well as for the safety of my minor child(ren), and EXPRESSLY ASSUME ALL RISK OF HARM, whether foreseen or unforeseen, and whether occurring while in the Studio or at any other location where I or my child(ren) are engaged in martial arts as part of a function held by the Studio or USSD. I hereby RELEASE and agree to INDEMNIFY AND HOLD HARMLESS the Company, the Studio, its shareholders, officers, employees, agents, instructors, patrons and participants, and insurers (hereinafter collectively referred to as ("Released Parties"), from and against any liability, demand, claim or right of action for any damage or injury, including paralysis or death, to any person or property even if such damage or personal injury results from the NEGLIGENCE of the Company, the Studio or other Released Parties. I further COVENANT NOT TO SUE or make any demand or claim against the Company or other Released Parties, for or by reason of any such damage or personal injury from my participation in martial arts related activities at the Studio, or anywhere, at any time. I will pay all fees, damages, and costs, including attorney's fees, the Company or other Released Parties may incur in the enforcement of this Student Application Agreement.

If I am a PARENT or GUARDIAN of any minor person under 18 years of age participating in the martial arts activities connected to USSD or the Studio, I make these representations and agree to the terms of of this Agreement on behalf of each minor, as well as myself, and I agree to assume responsibility for their safety. I further agree to INDEMNIFY AND HOLD HARMLESS USSD, the Studio and the other Released Parties, from and against any demand, claim, right of action or suit that may be brought on behalf of any such minor arising from all martial arts related activities related to USSD and the Studio, or anywhere, at any time, I will pay all fees, damages and costs, including attorney's fees, the Company, the Studio or other Released Parties may incur in the enforcement of this Agreement. I am physically fit and know of no medical or health reason why I or my minor child(ren) should not participate in this activity. I intend this Agreement to bind me and my family, _____ my assigns, estate, heirs and personal representative.

I hereby acknowledge and agree to the terms and conditions of these Terms / Conditions and Assumption of Risk Waiver.

Student (If not a minor) _____ Date _____

Responsible Party _____ Date _____