

# CORE JIU-JITSU LLC

Martial Arts Liability Waiver, Assumption of Risk & Release (Michigan)

THIS IS A LEGAL DOCUMENT. PLEASE READ CAREFULLY BEFORE SIGNING.

## Assumption of Risk

I understand that participation in martial arts, Brazilian Jiu-Jitsu, sparring, self-defense, conditioning, and fitness training involves **inherent risks**, including but not limited to strains, sprains, cuts, bruises, broken bones, concussions, serious injury, permanent disability, or death. I voluntarily choose to participate and **assume all risks**, known or unknown, arising from training, use of equipment, or presence at Core Jiu-Jitsu LLC.

## Release & Waiver of Liability

To the fullest extent permitted by **Michigan law**, I hereby **release, waive, discharge, and hold harmless** Core Jiu-Jitsu LLC and its owners, instructors, employees, contractors, and agents ("Released Parties") from any and all claims or liability arising from participation or use of the facilities, **including claims based on ordinary negligence**.

## Medical Responsibility

I confirm that I am physically able to participate and understand that Core Jiu-Jitsu LLC does **not** provide medical insurance. I agree to be fully responsible for all medical costs related to my participation

## Covenant Not to Sue

I agree not to bring any claim or lawsuit against the Released Parties related to participation, except as allowed under Michigan law.

## Photo & Video Release

I grant permission for Core Jiu-Jitsu LLC to use photographs or video recordings of me taken during training or events for promotional or educational purposes without compensation.

## Governing Law & Dispute Resolution

This Agreement is governed by the laws of the **State of Michigan**. Any dispute shall first be submitted to **good-faith, non-binding mediation in Michigan** before a lawsuit may be filed.

## Acknowledgment

I have read and understand this Agreement and sign it voluntarily, knowing that I am giving up certain legal rights.

☐ **I have read and understand this Waiver and Release.**

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

## **If Under 18 – Parent/Guardian Consent:**

I consent to the minor's participation and agree to this Agreement.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Emergency Contact: NAME:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_