

Liability Waiver Form

Invictus Krav Maga

PH: 858-888-1399

Email: invictuskra@gmail.com

Web: <https://invictus-kravmaga.com>

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HM PHONE: _____ EMAIL: _____

CELL PHONE: _____ T-SHIRT SIZE: _____

How did you hear about us? _____

In consideration of being allowed to participate in any way in the Krav Maga program, it's related events and activities, I _____, the undersigned, acknowledged, appreciate and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, IDEMNIFY, AND HOLD HARMLESS ROLL DE BONES, LLC; d/b/a INVICTUS KRAV MAGA and INTERNATIONAL KRAV MAGA FEDERATION; their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lesser of premises used for the activity ("releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law; and,
5. I am aware that, by signing this form, I am now considered a "member" of Invictus Krav Maga and freely take part in its training; and,
6. I am aware that ROLL DE BONES, LLC; d/b/a INVICTUS KRAV MAGA will close to observe various holidays and I will not seek reimbursement for those holidays. I am aware that I may review these holidays on the website prior to joining; and,
7. Further, I acknowledge and give my permission to exhibit my image or video on the website and all social media platforms pertaining to ROLL DE BONES, LLC; d/b/a INVICTUS KRAV MAGA and the INTERNATIONAL KRAV MAGA FEDERATION.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Signature: _____ Age: _____ Date Signed: _____

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (under age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant will remain on the premises for the duration of the class, and do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian Signature: _____ Emergency PH #: _____ Date Signed: _____