



## Release and Waiver of Liability

1. Whereas the student is identified as: \_\_\_\_\_  
the instructors agree to provide camp students with instruction in Martial Arts.

2. **PHYSICAL FITNESS:** The camp student hereby represents that he/she is physically fit enough to engage in the camps martial arts and any doubt concerning their fitness to the same is the responsibility of the student to resolve.

3. **INDEMNIFICATION:** Neither TUMAA, The Body Compound, including employees, agents, and contractors, including all instructors, agents, promoters, contractors, and others involved in the instructorship on his behalf accept any responsibility for the injury, negligence, or any other claim caused by or related to the camp participation in any of the martial arts instruction contemplated and provided hereunder, and shall save the same against all claims made on behalf of the participant or by any other person, firm, or corporation who forward any and all claims related to the participants involvement with the martial arts skills conveyed herein.

4. **ASSUMPTION OF RISK:** I AM AWARE AND UNDERSTAND THAT, IN GENERAL, MARTIAL ARTS IS A DANGEROUS AND HAZARDOUS ACTIVITY AND IN PARTICULAR, THE TRAINING IN WHICH I AM PARTICIPATING INVOLVES EXTREMELY DANGEROUS AND HAZARDOUS ACTIVITIES. I AM VOLUNTARILY AND OF MY OWN FREE WILL PARTICIPATING IN TRAINING WITH FULL KNOWLEDGE AND UNDERSTANDING OF THE SERIOUS DANGERS AND HAZARDS INVOLVED. I HERBY CONSENT AND COMPLETELY ACCEPT ALONE ANY AND ALL RISK OF INJURY OR DEATH, AND VERIFY AND CONFIRM THIS STATEMENT BY PLACING MY INITIALS HERE \_\_\_\_\_ *THE STUDENT*

**A)** CONSENTS TO EMERGENCY CARE PROVIDED IN THE EVENT OF ACCIDENT OR ANY AND ALL INJURIES TO THE STUDENT, AND

**B)** AGREES TO ASSUME THE FULL RISK OF ANY AND ALL INJURIES TO THE STUDENT ARISING FROM OR RELATED TO SUCH PARTICIPATION AND USE, AND HERBY RELEASES, DISCHARGES, HOLDS HARMLESS, AND WAIVES ANY AND ALL CLAIMS AGAINST THE INSTRUCTORS, THE DIRECTORS, OFFICERS, AGENTS, SERVANTS, AND EMPLOYEES OF HEARTLAND COMMUNITY COLLEGE, AS A RESULT OF SUCH INJURIES AND THEIR TREATMENT.

THE STUDENT UNDERSTANDS THAT 'INJURIES' ENCOMPASS WITH OUT LIMIT ALL PHYSICAL, EMOTIONAL, AND FINANCIAL DAMAGES.



5. RELEASE: IN CONSIDERATION FOR BEING PERMITTED BY THE COMPLETE SPONSORS (AS THAT TERM IS DEFINED BELOW), TO PARTICIPATE IN THIS CAMP AND IN CONSIDERATION FOR BEING PERMITTED THE USE OF HEARTLAND COMMUNITY COLLEGE FACILITES IN CONNECTION WITH TRAINING I HEREBY AGREE THAT I, MY HEIRS, DISTIBUTES, GUARDIANS, SUCCESSORS, IN INTEREST AND LEGAL REPRESENTATIVES COLLECTIVLY REGARDED TO AS RELEASOR, WILL NOT MAKE ANY CLAIM OR FILE AN ACTION OR SUIT AGAINST, SUE OR ATTACH THE PROPERTY OF (A) THE SPONSORS, THE UNITED MARTIAL ARTS ASSOCIATION AND/OR ANY OF THEIR RESPECTED AFFICIATED ORGANIZATIONS (COLLECTIVELY REFERRED TO AS COMPLETE SPONSORS), AND (B) ANY AND ALL MANUFACTURERS, DISTRIBUTORS, WHOLESALERS, SUPPLIERS, RETAILERS, AND OR PROVIDERS OF THE FACILITES AND EQUIPMENT I WILL USE IN CONNECTION WITH TRAINING AND ITS ACTIVITIES (COLLECTIVELY KNOWN AS RELEASES) FIRE DAMAGES INJURY, EMOTIONAL DISTRESS,CLAIMS, BODILY INJURY, CLAIMS AND PUNITIVE DAMAGES WHETHER KNOWN OR UNKNOWN, FORSEEN,OR NOT DUE TO OR RESULTING FROM THE ACTS, CONDUCT, NEGLEGANCE, MISFEASANCE OF, OR FAILURE TO ACT BY,THE RELEASES,OR ANY OF THEM.

6. HEALTH ADVISORY AND CONDITION: I hereby acknowledge and understand that participation in training in involves extremely strenuous physical activity and that I have been consulted by a medical doctor and that I am fit enough to participate. I hereby represent that to the best of my knowledge I am in good physical health, condition, sufficient to undertake the activities and practices required during the camp.

7. KNOWING AND VOLUNTARY EXECUTION: I hereby declare that I have carefully read this release from liability, and that I fully understand the meaning and importance of its contents. I acknowledge this is a binding contract among the complete sponsors, suppliers, and me, and that under this contract I am releasing the complete sponsors and the suppliers from all liability for claims I may have against them. I further declare I am at least 18 years of age and I have full legal capacity to be bound by this contract.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Witness \_\_\_\_\_

***If under 18 years of age:***

Parent/guardian signature \_\_\_\_\_