WAIVER AND RELEASE

THIS AGREEMENT MUST BE SIGNED BY ALL PERSONS WHO WISH TO PARTICIPATE IN ANY CLASS OR EVENT AT CHAOS COURSE, LLC.

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: (\_\_\_\_\_\_)\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_

In consideration of being permitted to participate in the activities conducted by Chaos Course, LLC, I agree as follows on behalf of myself, my personal representatives, heirs, beneficiaries and assigns.

I ACKNOWLEDGE AND AGREE that my participation with Chaos Course, LLC is for the purpose of practicing Karate; practicing other martial arts, or practicing other physical activities; the practice of Karate, other martial arts or physical activities is physically strenuous, dynamic, and challenging practice of self defense which includes, but is not limited to, punching, kicking, striking and grappling, both individually and with partners. I further understand that such activity includes inherent dangers including serious bodily injury, permanent disability, paralysis or death which may be caused from my actions or inactions, the actions or inactions of others or the conditions of the facility in which the activity is conducted; I understand there may be other risks or other social or economic losses either not known to me or readily foreseeable at this time; and I FULLY ACCEPT ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES , COSTS, AND DAMAGES incurred as a result of my participation in the activity. I have consulted with my physician prior to engaging in the practice of Karate or other activities with Chaos Course, LLC and I am qualified, in good health and proper physical condition to participate in such activity. I am responsible for monitoring my own activity level and maintaining awareness of my own physical limitations. I further agree that I will immediately discontinue participation in any activity which I perceive to be unsafe for any reason.

I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE AND AGREE TO HOLD HARMLESS Chaos Course, LLC, its owners, members, instructors, agents, officers, volunteers, employees and other participants, owners and lessors of the premises on which the activity takes place (each considered a "Releasee") from all liability, claims, demands, losses or damages on account caused or alleged in whole or in part by any act or omission of the Releasees in connection with the activities described above, whether or not caused in whole or in part by the negligence of any Releasee, including rescue operations, and further agree that if, despite this release, I or anyone on my behalf makes a claim against any Releasee, I will indemnify, save and hold harmless each of the Releasees from any litigation expenses, attorneys fees, loss liability, damage or cost as may occur as the result of such claim.

I agree to abide by all rules and regulations of Chaos Course, LLC, and to exercise caution and restraint when performing physical activities individually and with other students, or instructors. I agree to immediately report any unsafe conditions which come to my attention, including but not limited to the floor or any equipment. Any intentional act to injure another participant is expressly prohibited.

Chaos Course, LLC reserves the right to dismiss any participant at any time for any reason.

PUBLICITY: I, the undersigned, grant permission for my/our name(s), photographic image, and/or quotations to be published in print (including, but not limited to newsletters, brochures, newspapers, etc.), on the internet, shown on television, or used in videos, in conjunction with Chaos Course, LLC and its business practices.

SEVERABILITY: If any clause, sentence, phrase or statement is found unenforceable or invalid by any Court of Law, the remainder of the document shall remain valid enforceable and the invalid clause, sentence, phrase or statement shall be struck from the document.

DURABILITY: This document is effective from the date signed with no expiration. Furthermore, the terms of this document are retroactive to the beginning of training and visiting this school if this document was signed after that date.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY; I HAVE HAD AN OPPORTUNITY TO CONSULT WITH LEGAL COUNSEL SHOULD I SO DESIRE; I INTEND THIS TO BE A COMPLETE RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE SHALL CONTINUE IN FULL FORCE AND EFFECT.

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Participant (please print) Signature Date

Minor Release

I AM THE MINOR'S PARENT AND/OR LEGAL GUARDIAN AND HAVE THE ATHORITY TO EXECUTE THIS WAIVER ON HIS/HER BEHALF. I UNDERSTAND THE NATURE OF KARATE, MARTIAL ARTS, PHYSICAL EXERCISE AND OBSTACLE COURSES AND THEIR PRACTICE AS DESCRIBED ABOVE AND THE MINOR'S EXPERIENCE AND CAPABILITIES; I BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY.

I hereby adopt and fully incorporate the entirety of the above WAIVER OF LIABILITY AND RELEASE, ASSUMPTION OF RISK on the minor's account and behalf, releasing all Releasees in the manner and upon the terms described above on behalf of the minor, his/her parents/guardians, personal representatives, heirs, beneficiaries, and assigns.

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Minor Child’s Name Parent/Legal Guardian (printed)

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Date Parent/Legal Guardian (signature)