**WAIVER FORM**

**ACKNOWLEDGEMENT, ASSUMPTION OF RISKS, HOLD HARMLESS AND RELEASE OF CLAIMS**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, desire to participate in training offered by Bastion Defense, LLC and Associates (hereafter, the “Training”). I understand that the Training is by its nature fluid, physical, and dangerous, and participating in the Training is potentially hazardous despite the exercise of all due care. I understand that potential risks include, without limitation, the risk of serious bodily injury, possible permanent disability, paralysis, and death. These risks may be caused by my own action(s) or inaction(s), or the action(s) or inaction(s) of others. I hereby certify that I willingly and knowingly wish to participate in the Training in spite of these risks. I further certify that CounterStrike Krav Maga and Associates (hereafter, collectively, “Bastion Defense, LLC”) have given me a full and adequate opportunity to ask questions and obtain a full and complete explanation of the risks of the Training. By entering and participating, I affirm I am properly prepared for the Training and medically able to do so.

I, on behalf of myself and my heirs, successors, assigns, executors, and administrators, do hereby forever, irrevocably and unconditionally acquit, discharge, waive, and release Bastion Defense, LLC from any and all liability, actions, causes of action, claims, expenses, obligations, and/or damages of any nature whatsoever for personal injuries, consortium, property damage, or other claims which I may have or which may hereafter accrue to me, arising out of participating in the Training. This waiver is intended to release Bastion Defense LLC, together with its owners, officers, agents, employees, instructors, staff and volunteers, as well as any and all training locations supporting the Training (hereafter, the “Released Parties”), from any and all liability arising out of or connected in any way with my participation in the Training, even though that liability may arise out of negligence or carelessness on the part of the Released Parties. I agree to indemnify and to hold the Released Parties free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said Training. I further agree to hold harmless and indemnify the Released Parties for all defense costs, including attorney fees, and any other costs resulting in connection with my participation in this program. I also understand that this release relates to all claims and liability resulting from unforeseen hazards.

I expressly agree that this Acknowledgement, Assumption of Risks, and Release of Claims is intended to be as broad and inclusive as permitted by the law of the State of Alabama, and that if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**I HAVE CAREFULLY READ THIS ENTIRE “ACKNOWLEDGEMENT, ASSUMPTION OF RISKS, HOLD HARMLESS AND RELEASE OF CLAIMS,” AND FULLY UNDERSTAND THE CONTENTS, AND I SIGN THIS RELEASE AS MY OWN FREE ACT. MY SIGNATURE INDICATES THAT I HAVE SATISFIED MY QUESTIONS AND CONCERNS REGARDING THE TRAINING BY TALKING WITH A REPRESENTATIVE OF Bastion Defense, LLC.**

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Signature of legal parent/Guardian if minor

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Printed name of Participant Signature of Participant

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Printed Name of Witness Signature of Witness