



Watson Martial Arts

2737 Papin Street
St. Louis, MO 63103

www.watsonbjj.com
260-BJJ-4-STL (260-255-4785)

For Office Use Only

Comments: _____

Release of Liability and Assumption of Risk Agreement

This release of liability and assumption of risk agreement (hereinafter, this "Release") must be read and signed before the participant is allowed to take part in any activity. Y cvuqp"O ctvkc" Ctvu"NNE"ku" tghgtgf"vq"kp"vjku"fqew o gpy"cu"vjg"\$Dwukpguu\$0

IN CONSIDERATION of being permitted to participate in any way with the Business, I acknowledge and agree that:

- I have read and agree to the Business' rules, regulations and assumption of risk notice, which are posted at the gym and online.
- There is the chance of being injured, becoming ill, becoming permanently disabled or even dying as a result of my participation in the activities performed at the Business. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF OTHERS, and assume full responsibility for my participation.
- I understand that in case of emergency, I hereby authorize any licensed medical personnel to perform any medical assistance deemed necessary by medical personnel, and I agree to bear the expense of any such medical treatment.
- I may choose to cease any activity and vacate the property at any time during my participation, but I will notify the present instructor prior to my cessation and departure.
- On behalf of myself, my heirs, assigns, personal representatives and next of kin, I HEREBY RELEASE the Business and all persons acting by, through or on behalf of the Business or otherwise involved in conducting the activities, which includes, but is not limited to, owners of the premises and the Business' independent contractors and volunteers (hereinafter, the "Releasees"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH and loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, except that which is the result of gross negligence and/or intentional misconduct. I also agree to INDEMNIFY AND HOLD HARMLESS the Releasees from all claims, judgments and costs, including attorney and expert fees, incurred in connection with any action resulting from my participation in or observation of the activities. This includes but is not limited to responding to threats of legal action against the Business in addition to actual litigation.
- I understand and agree that this Release covers each and every activity and event that is conducted by the Business in which I participate or which I observe on this date and hereafter.
- I agree that my attendance and/or performance at the Business and at events associated with the Business may be photographed, filmed and/or taped and used by the Business for marketing purposes, and I authorize the use of my image and I waive any compensation thereof – even if I discontinue my training at the Business.
- This waiver is to be enforced under the laws of the State of Missouri.
- Any dispute between the Business and me shall be litigated in the Circuit Court of St. Louis County, Missouri.
- If any portion of this Release is held to be legally invalid or unenforceable, then that portion of the Agreement shall be considered severable to the extent of such unenforceability or invalidity.
- THE BUSINESS AND I HEREBY WAIVE OUR RIGHT TO TRIAL BY JURY IN ANY DISPUTE ARISING IN CONNECTION WITH OUR EXECUTION OF THIS RELEASE OR MY PARTICIPATION IN OR OBSERVATION OF THE ACTIVITIES AT THIS GYM. I HAVE HAD THE OPPORTUNITY TO CONSULT AN ATTORNEY PRIOR TO SIGNING THIS DOCUMENT.
- **I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

First Name

Last Name

Email

Phone

Current Address (Street / City / State / Zip Code)

Emergency Contact (Name / Phone)

Signature

Today's Date

PARENT OR GUARDIAN OF PARTICIPANT UNDER 18 YEARS OF AGE MUST READ THIS FORM AND SIGN BELOW

This is to certify that I, as the parent/guardian, with legal responsibility for this participant, do consent and agree not only to his/her Release of Watson Martial Arts LLC, its members, and all other Releasees, but also I agree to release and indemnify and hold harmless the Releasees from any and all liabilities incident to said participant's involvement in these programs on behalf of myself, my heirs, assigns and next of kin.

Printed Name

Signature

Phone

Today's Date