

Jacob's Submission Wrestling and MMA

NorthPointe Church

WAIVER/RELEASE AGREEMENT

WARNING, WAIVER, RELEASE OF LIABILITY, ASSUMPTION OF RISK AND AGREEMENT TO PARTICIPATE THIS AGREEMENT MUST BE SIGNED BY ALL MEMBERS AND ANYONE WHO WISHES TO PARTICIPATE IN ANY ACTIVITY OR EVENT of the Jacob's Submission Wrestling and MMA/NorthPointe Church.

In consideration of being allowed to participate in any way in the Jacob's Submission Wrestling and MMA/NorthPointe Church, I, _____

1. Recognize and understand that martial arts training is a physical contact activity and that my participation might result in serious injury, including permanent disability or death and severe social and economic loss.
2. Recognize and understand that such risk may be due to, not only, my own actions, but also the action, inaction or negligence of others, the regulations of participation, the conditions of the premises, or of any of the equipment used.
3. Recognize that there may be other risks that are not known to me or to others or not reasonably foreseeable at this time.
4. Agree to inspect the facilities, equipment and pairings prior to participation. I will immediately inform an instructor of the institute if I believe that anyone is unsafe or beyond my capability and refuse to participate.
5. Assume all the foregoing risks and accept personal responsibility for any damages that may result from injury, permanent disability or death.
6. Enter martial arts training and competition entirely of my own free will and understand the importance of the following the rules of training and competition. I have been given the rules and regulations of the Jacob's Submission Wrestling and MMA/NorthPointe Church and agree to abide by the instructions given.
7. Certify that I am in good physical condition, and have no disease, injury or other condition that would impair my performance or physical and mental well-being during intense training practice and/or competition.
8. Grant permission in case of injury to have a doctor, nurse, athletic training or other emergency medical personnel provide me with medical assistance or treatment for such injury.
9. Release, waive, discharge and covenant not to sue, Jacob's Submission Wrestling and MMA/NorthPointe Church, affiliated organizations and participants, supervisors, coaches, sponsoring organizations or their agents, and if applicable, owners and leasers of the premises from any and all liability to undersigned, his or her heirs and next of kin for any and all claims, demands, losses and damages which may be sustained and suffered on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the release's or otherwise.

I HAVE READ THE ABOVE WARNING, WAIVER, RELEASE AND AGREEMENT TO PARTICIPATE. I UNDERSTAND ITS CONTENTS AND DO HEREBY SIGN IT VOLUNTARILY.

_____ Printed Name	_____ Signature	_____ Date
I certify that my child, being under the age of 18, has my permission to attend the Jacob's Submission Wrestling and MMA/NorthPointe Church, and that I have understood all that is expressed in this waiver and release of liability, and I certify that I am of sound judgment, legally competent to agree to this waiver.		

_____ Printed Name of Parent or Guardian if under 18	_____ Signature	_____ Date
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_____ Signature of the Jacob's Submission Wrestling and MMA/NorthPointe Church instructor	_____ Date
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