



Anthracite Combat Club Inc.
WAIVER AND RELEASE OF LIABILITY

NOTE: This form must be read and signed before the participant listed below is permitted to practice and/or participate in any practice or competition.

I acknowledge that Brazilian Jiu-Jitsu is an extreme test of a person's physical and mental limits and that my participation in Brazilian Jiu-Jitsu training or competition can cause the potential for death, serious injury, or property damage. Training in Brazilian Jiu-Jitsu can result in bruises, cuts, ligament and tendon damage, broken bones or even catastrophic damage or loss.

With full understanding of the potential risks, **I HEREBY ASSUME ALL THE RISKS OF PARTICIPATING IN BRAZILIAN JIU-JITSU OR COMPETITION.**

I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assign:

- a) I waive, release, and discharge from any and all claims or liabilities for death or personal injury or damages of any kind which are out of or relate to participating in Brazilian Jiu-Jitsu training and competition and even traveling to such events. The following persons or entities: **Anthracite Combat Club Inc.**, its instructors, fellow participants, officers, directors, employees, representatives and agents of any of the above;
- b) I agree not sue any of the persons or entities listed above for any of the claims or liabilities that I have waived, released or discharged herein; and
- c) I indemnify and hold harmless the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my participation in the art of Brazilian Jiu-Jitsu.

By signing this form, I affirm that I am eighteen 18 years of age or older, I have read this document, and I understand and agree to abide by its contents.

Participant's Name (printed)

Participant's Signature

Participant's Date of Birth

Date of Document Signed

If the participant is under the age of 18: As parent/guardian I have read this form in its entirety and understand the rights that the participant waives by participating in Brazilian Jiu-Jitsu training with Anthracite Combat Club Inc. As parent/guardian I understand the danger associated with Brazilian Jiu-Jitsu training and I knowingly allow the participant to train and participate in this form of self-defense and competitive training.

Participant's Parent/Guardian Name (printed)

Participant's Parent/Guardian Signature

Participant's Date of Birth

Date of Document Signed