## WAIVER OF LIABILITY

WHEREAS, as part of a community-based safety-training activity, the North Judson Police Department is offering, I have the opportunity to participate in a female self-defense course, as well as other physical activities incidental thereto; and

WHEREAS, I understand and appreciate the risks inherent in participation in the above-listed activities, and I voluntarily and knowingly assume those risks.

In consideration of being allowed to participate in the aforementioned activities, and all activities planned during the course of this community-based safety-training offering, I, on behalf of myself and my next of kin, heirs and representatives, hereby agree as follows:

- 1. I hereby release the Incorporated Town of North Judson and the North Judson Police Department, its employees, officers, trustees, director(s) and assigns, from any liability for any injury or loss I might incur in connection with my participation in these listed activities, and those activities incidental thereto. I further understand that the activities that will be offered for this self-defense course are physical in nature, and are inherently dangerous activities, and accept all such risks, including serious injury and/or death.
- 2 I, for myself, my heirs, executors and administrators, waive and release forever any and all rights for claims and damages I may have against the Incorporated Town of North Judson or the North Judson Police Department, its employees, officers, trustees, director(s) and assign, including the staff members and supervisors, in any manner due to any personal injury or property loss sustained by me as a result of my participation in these listed activities, and/or my participation in the activities associated or incidental to this community-based recreational experience, including any activities I may engage in during my free time while participating in the above listed activities.
- 3. I understand that I will be responsible for my own welfare and safety.

I am eighteen (18) years or older. I understand the legal consequences of signing this document, including (a) releasing the Incorporated Town of North Judson and the North Judson Police Department from all liability, and (b) assuming all risks for participating in these activities, which may include serious injury and/or death.

PRINTED NAME:	
Participant's Signature:	Date:

I am the parent or legal guardian of the Participant. I understand the legal consequences of signing this document, including (a) releasing the Incorporated Town of North Judson and the North Judson Police Department from all liability on my and the Participant's behalf, and (b) assuming

all risks of the Participant's participation in these activities.	I allow the following Participant(s) to
participate in this field trip.	
CHILD(REN)'S NAMES	

PRINTED NAME:			
PRINTED NAME:			
PRINTED NAME:			
PRINTED NAME:			
Signature of Minor Pa	rticipant's Parent/Guardian:	1	Date:
Printed Name of Mino	or Particinant's Parent/Guardian:		