## Armed Training Solutions Accident Waiver and Release of Liability Form

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Chec	k One:	□Concealed Handgun Licensing □Basic Pistol Marksmanship □CQB / Home Defense Pistol Course □Advanced Rifle Marksmanship Course	□ Concealed handgun license renewal □ Advanced Pistol Marksmanship □ Basic Rifle Marksmanship Course □ CQB / Home Defense Rifle Course
I HEREBY ASSUME ALL OF THE RISK OF PARTICIPATING IN THIS ACTIVITY OR EVENT, including by way of example and not limitation, any risk that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them or because of their possible liability without fault.			
I certify that to the best of my knowledge, I am in good physical condition and fully able to participate in this course and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this course.			
I am fully aware of the risks and hazards connected with the participation in this course, including physical injury or even death, and hereby elect to voluntarily participate in said event, knowing that the associated physical activity may be hazardous to me and my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, or loss or damage to property owned by me, as a result of participation in this course.			
In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:			
(A)	negligence damage, p traveling to	e or fault of the entities or persons released, to roperty damage, property theft, or actions of and from this course. THE FOLLOWING Electrons of the course in the course.	ability, including but not limited to, liability arising from for my death, disability, personal injury, property any kind which may hereafter occur to me including my NTITIES OR PERSONS: ARMED TRAINING loyees (hereinafter referred to as, RELEASEES)
(B)	paragraph		OT TO SUE the entities or persons mentioned in this is a result of participation in this course, whether caused
I acknowledge that this course may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks include but are not limited to; those caused by terrai facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to; participants, volunteers, spectators, course instructors, and monitors, and lack of hydration. These risks are not only inherent to participants, but are also present for volunteers.			
I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/o illness during this course or activity.			
	I understand that during this course or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for and legitimate purpose by Armed Training Solutions, their officers, servants or agents.		
The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.			
IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I HAVE READ THE FORGOING WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT, UNDERSTAND IT AND SIGN IT VOLUNTARILY AS MY OWN FREE ACT AND DEED; NO ORAL REPRESENTATIONS, STATEMENTS OR INDUCEMENTS, APART FROM THE FOREGOING WRITTEN AGREEMENTS HAVE BEEN MADE; AND I EXECUTE THIS RELEASE FOR FULL, ADEQUATE AND COMPLETE CONSIDERATION FULLY INTENDING TO BE BOUND BY SAME.			
Signa	ature		Print Name

Date