

**FIGHTING ARTS  
COMPANY**



# Fighting Arts Company Toronto

## Individual Consent to Participate and Release Liability (Waiver)

The undersigned (hereafter I), do hereby state that I wish to participate in the activities offered by the Fighting Arts Company Toronto (hereafter FACT).

- 1) FACT possesses rules and policies, which govern the activities in which I can participate. These rules and policies include, but are not limited to: training principles, competition and tournament rules, combat and demonstration activities, arms and armour specifications and the by-laws of FACT.
- 2) FACT makes no representations or claims as to the condition or safety of the land, structures or surroundings, whether or not owned, leased, operated or maintained by FACT.
- 3) I understand that all activities are VOLUNTARY and that I am under no obligation to participate unless I choose to do so. I understand that all activities are potentially dangerous or harmful to my person and/or property, and that by participating I voluntarily accept and assume the risk of injury to myself and/or damage to my property.
- 4) I understand that FACT does NOT provide any insurance coverage for my person or my property. I acknowledge that I am responsible for my safety and my own health care needs, and for the protection of my property.
- 5) In return for allowing me to participate in these FACT activities and events, I agree to release from liability, agree to indemnify, and hold harmless FACT, and any FACT agent, FACT Member Organization<sup>1</sup>, officer or FACT employee acting within the scope of their duties, for any injury to my person or damage to my property.
- 6) This Release shall be binding upon myself, successors in interest, and/or any person(s) suing on my behalf.

I have read the statements of this legal document, understood the statements of this legal document and agree with its terms and conditions. I understand that this document is complete unto itself and that any oral promises or representations made to me concerning this document and/or its terms and conditions are not binding upon FACT, its officers, agents and/or employees. I have voluntarily signed it and execute it voluntarily with full knowledge of its meaning, its significance and implications.

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Legal Name (print)

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Legal Name (signature)

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Witness: FACT officer (print)

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Witness: FACT officer (signature)

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Date:

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<sup>1</sup> FACT Member Organization == AEMMA, JKD Centre, Toronto Wing Chun Academy, TTAC3