

WAIVER AND RELEASE OF LIABILITY FOR STUNT CLASSES

I, _____, hereby agree to the following:

1. That I am participating in the training, programs, exercises and events, Stunt Classes (Stunt techniques, Martial Arts, Parkour, Breakdance) offered by Julien Briau during which I will receive instruction.

2. I understand that it is my responsibility to consult with a physician prior to and regarding my participating in any Stunt Classes. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in this class.

3. In consideration of being permitted to participate in any Stunt Class I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which I might incur as a result of participating in the program.

4. In consideration of being permitted to participate in any Stunt Program I knowingly, voluntarily, and expressly waive any claim I may have against Julien Briau for injury or damages that I may sustain as a result of participating in the program.

5. I, my heirs or legal representatives forever release, waive, discharge, and covenant not to sue Julien Briau any injury or death caused by their negligence or other acts.

I have read the above release and waiver of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Name (Please Print): _____ Birthdate: _____

In case of Emergency, contact: _____ Phone: _____

Participant's Signature: _____ Date: _____

(Parent's signature if under 18 years of age)

I represent that I have legal capacity and authorize to act on behalf of the minor named herein.

Parent/Guardian Signature: _____ Date: _____