2019 USAF SUMMER CAMP RELEASE FORM

I, the undersigned applicant to the United States Aikido Federation ("USAF"), Aikido Summer Camp, held at the Stockton Dolce Hotel and Golf Club ("Hotel") located at 401 South New York Road, Galloway, NJ, ("USAF Summer

Camp"), understand and acknowledge that I am applying for instruction in Aikido, a martial art involving strenuous exercise and body contact. As a condition to, and in consideration of, the privilege of being admitted as a participant to this year's USAF Summer Camp, of receiving instruction in Aikido, and of receiving the permission to use the facilities of the Hotel while attending the USAF Summer Camp, I hereby agree and promise to assume risk and responsibility for any and all injuries, or damages due to injuries, suffered by me or caused by third parties to me, arising out of participation in activities involving Aikido, or the USAF Summer Camp, whether classes, demonstrations, practices or any other use of the Hotel's premises, facilities or equipment of the Hotel or the USAF, whether occurring on the premises of the Hotel where the USAF Summer Camp is being conducted or at any other location.

I hereby release, indemnify, and forever discharge and hold harmless the USAF, its directors, officers, coordinators, employees, volunteers, students, representatives, agents and servants from any and all responsibility, liability, claims for personal injury, legal actions or suits, damages or losses of any kind or description, both at law and in equity, arising out of, or in any way connected with, any of the above mentioned acts and activities. I hereby agree and covenant myself, and my successor and assigns, never to sue, either at law or in equity, the USAF, its directors, officers, coordinators, employees, volunteers, students, representatives, agents and servants, on account of any such claim, demand, liability, damage, injury, or loss. I fully understand and acknowledge that I am responsible for consulting with my doctor(s) or other healthcare practitioner, if any, with respect to training at the USAF Summer Camp as it relates to any medical condition(s) I now have or may have while attending the USAF Summer Camp, including, but not limited to, any injuries I may have received prior to, or during the USAF Summer Camp.

Furthermore, I grant permission to the USAF and its authorized representatives and agents, to use my image and voice in any

photography/videography arising from this year's USAF Summer Camp in any form, without restriction. I expressly release and discharge the USAF and their representatives and agents, or any person or institution having the USAF's permission to transmit or exhibit any and all parts of the USAF Summer Camp in any form from any claims arising from such use or distribution.

I further understand that it is prohibited to sell or distribute photographs, videotapes, artwork or other likenesses of any instructor or participant at the USAF Summer Camp without the participant or instructor's consent. IN WITNESS WHEREOF, I have set my hand and seal to this document which I intend to be a legally binding document, on the day and year below written and understand it fully.