

### **Davis Fencing Academy Waiver**

I declare that I am in good physical health, and/or have consulted a physician about possible health risks involved in fencing. \_\_\_\_\_ Initial

I understand that fencing is a high speed, contact sport that can cause severe injury, crippling paralysis, or death. I accept the risks involved and will not hold DFA, any of its members, employees, volunteers and/or coaches responsible for injuries incurred on the premises and while participating in any DFA related activity. I understand that DFA is not responsible for injuries due to the negligence of any of the above. \_\_\_\_\_ Initial

I understand that anyone not wearing proper fencing equipment (mask, glove, jacket, gym or fencing shoes) will be asked to forfeit their class. \_\_\_\_\_ Initial

I understand that laser pistol marksmanship involves the use of a laser pistol. While this device resembles the shape of a pistol, it only uses a beam of light, similar to a laser pointer. We require that participants in laser pistol marksmanship are respectful of the equipment and the coaches. \_\_\_\_\_ Initial

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_