

**NAPERVILLE POLICE DEPARTMENT
PARTICIPANT LIABILITY WAIVER AND HOLD HARMLESS AGREEMENT**

Please read this form carefully and be aware that by registering for and participating in this program, you will be waiving your rights to all claims for injuries you might sustain arising out of this program; and you will be required to indemnify, hold harmless, and defend the City of Naperville for any claims arising out of participation in the Naperville Police Department Self-Defense Seminar held at Safety Town.

Usage: I understand that use of this program is strictly voluntary. I also understand that the Self-Defense Seminar at Safety Town is for use by adults only, and minor children are not allowed to participate.

Risk of Injury: As a participant in the program, I recognize and acknowledge that there are certain risks of physical injury, and I assume willfully those risks. I acknowledge my obligation to immediately inform the nearest supervising employee of any symptoms that I may suffer during and immediately after my participation. I understand that I may stop or delay my participation in any activity or procedure if I so desire and that I may also be requested to stop and rest by a supervising employee who observes any symptoms or abnormal response. I agree to assume the full risk of injuries, including death, damages, or loss which I may sustain as a result of participating in any and all activities associated with this program.

Waiver of Injury Claims: I agree to waive and relinquish any and all claims I may have arising out of, connected with, or in any way associated with the activities of the program. In the event of any emergency, I authorize the public entity to secure any treatment deemed reasonable and necessary for my immediate care and agree that I will be responsible for payment of any and all medical services rendered.

Release and Indemnification

In consideration of the benefits I may derive by being allowed to participate in the program, I, the undersigned, with full knowledge of the inherent dangers and with an intent to expose myself to said known dangers, do hereby for myself, my heirs, executors and administrators, assume all risks associated with my participation and waive all future claims I may have arising there from, including but not limited to financial loss, property damage, physical, emotional and psychological trauma and injury, death, and any other damages. I do hereby release and indemnify the City of Naperville, it's officials and any other employee or agent from any and all liability whatsoever for any said injuries, accidents and/or damages caused by or incurred as a result my voluntary participation in this program.

The undersigned has carefully read and fully understands this waiver and assumption of risks and intends that this agreement be as broad and inclusive as permitted by the laws of the State of Illinois. The undersigned affirms that this waiver has been entered into voluntarily and is binding upon the undersigned and his/her heirs, successors, executors and/or administrators.

Applicant's signature: _____ Date: _____

**NAPERVILLE POLICE DEPARTMENT
SEMINAR INFORMATION**

PARTICIPANT NAME: _____

EMERGENCY CONTACT: _____

EMERGENCY CONTACT PHONE NUMBER: _____

The City of Naperville's Police Department would like your permission to utilize photos from the seminar on its website and social media pages. Please sign below if you give consent to have your photo taken.

CONSENT SIGNATURE: _____

If your wish is to not have your photo taken and possibly posted to a social media page of the City of Naperville, please sign your name below to opt out of photo opportunities.

DO NOT CONSENT SIGNATURE: _____



One Light Self-Defense Waiver

Attire: Comfortable clothes & gym shoes
(Please refrain from wearing jewelry.)

Name: _____ Age: _____

Phone: _____

Email: _____

I understand, acknowledge, and hold One Light Self Defense and its self-defense volunteers as well as the hosting organization/facility harmless from any liability arising out of my participation in this activity. I accept the risk involved in this event and know that I may suffer or experience personal injury or bodily damage; I fully assume responsibility for such risk.

Signature: _____ Date: _____

Parent Signature _____ Date: _____
(if under 18)

I give One Light Self-Defense permission to display photos of self-defense workshops that may include myself as a participant.

Signature: _____ Date: _____

Parent Signature _____ Date: _____
(if under 18)