



STUDENT LIABILITY
RELEASE
AGREEMENT

WASHINGTON STATE CRIMINAL JUSTICE
TRAINING COMMISSION

Course GROUND SURVIVAL TACTICS INSTRUCTOR COURSE #2187-1	Dates March 12-14, 2012
Location WSCJTC TRAINING CENTER BURIEN, WA	

In consideration of being allowed to attend and participate in the **Ground Survival Tactics Instructor** class, while in the normal course of my employment, and in recognition of the personal and professional benefit to be gained therefrom, I personally assume all risks, whether foreseen *or* unforeseen, in connection with my participation in this course. I further release the Commission, its instructors, agents and operators, for any harm, injury or damage, which may occur to me while in attendance. *I hereby hold harmless the Commission and said persons from any claim by me, or my family estate, heirs, or assigns, arising out of my attendance and participation in this course.*

In signing this Release Agreement, I assert that

- (a) I am presently in good physical and mental health, _____
- (b) I have no reason to believe that I am not in good physical and mental health, _____
- (c) I know the risks involved in Ground Survival Tactics Instructor, and that unanticipated risks may arise during such activities, _____
- (d) I have read and fully understand the terms and conditions of this Release, _____
- (e) I understand that the terms herein are contractual and not a mere recital, _____ and
- (f) I have signed this Release as my own free act. _____

Attendee Name (PLEASE PRINT)	Attendee Signature
Date March 12, 2012 TIME: _____	Agency