



## RELEASE of LIABILITY FORM

Global One, LLC dba Global One Defense, LLC

I \_\_\_\_\_ understand that participating in any classes/training/Instruction or consulting activities occurring through Global One under any circumstances, including those involved herein, are activities which involve an inherent risk of injury or even death to any individual undertaking such an activity, and that there will exist conditions over which neither I nor Global One, LLC, the owner, the representative of, the employees of, the agents of, and/or the operators of have any control, and I have satisfied myself that I am aware of the various ways in which I might suffer such an injury or death, and I expressly assume all risks, whether known or unknown. \_\_\_\_\_

I understand my use of this information and/or training will result in consequences, whether good or bad, foreseen or not, and as such I will not take any legal action or any other action against Global one, LLC. the owner, the representative of, the employees of, the agents of, and/or the operators of nor Global One, LLC, the owner, the representative of, the employees of, the agents of, and/or the operators of for use of such information and/or training. \_\_\_\_\_

I have been made aware of the importance of providing accurate health information, including medical history, medical conditions, and/or medical concerns to my Global One, LLC Instructors and/or trainer and/or counselor, and/or consultant prior to beginning a training program with Global One, LLC. I understand that it is my responsibility to provide such information and I will be responsible for providing any changes in this information to my instructors and/or trainer and/or counselor and/or consultant in a timely manner. I further understand that failure to fully provide such information may increase potential dangers resulting from participating in a training program with Global One, LLC.

I hereby state and represent that I am in good physical and mental health and no one but myself is responsible for judging whether or not I am able to participate or am able to withstand the physical and mental stress inherent in the activities contemplated by this Release. I further state and affirm that I am unaware of any health-related problem that may affect my ability to participate, if I so choose, in the activities contemplated by this Release. \_\_\_\_\_

By signing this Release, it is my express intent to waive, release and extinguish for myself, and anyone claiming by or through me, all liability on the part of Global One, LLC, the owner, the representative of, the employees of, the agents of, and/or the operators of, for all possible claims, known or unknown, whether foreseeable or not, for any injuries to myself or any personal property, which may occur during, or in preparation for a Global One, LLC training program, whether caused by negligence or otherwise. \_\_\_\_\_

I acknowledge that this is a legally binding contract. If a court should decide that any clause or other portion of this contract is illegal or unenforceable, I agree that such a determination shall not affect the validity and enforceability of the remaining provisions thereof, all of which shall remain in full force and effect. \_\_\_\_\_

**Are you under the age of 18? YES** \_\_\_\_\_

I affirm with my signature affixed hereto below that I have carefully read and understand each and every paragraph above and that I have voluntarily chosen to participate in this Global One, LLC, training program. I further affirm that I voluntarily listed my email address and give my permission to Global one Defense to send me messages, bulletins, and notice of future training.

\_\_\_\_\_  
Signature of Participant/Parent or Guardian

\_\_\_\_\_  
DATE

**EMAIL:** \_\_\_\_\_

**Bold Print Clearly**