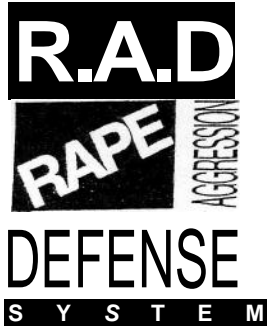


REGISTRATION/RELEASE FORM



Name: _____

Address: _____

State and Zip: _____

Course: _____ Date: _____

Location: _____

Primary Instructor: A. Codron

RELEASE FOR RAPE AGGRESSION DEFENSE SYSTEMS PHYSICAL DEFENSE SYSTEM

The undersigned hereby acknowledges to Rape Aggression Defense Systems, Inc., its Founder, Executive Board, Staff and Instructor(s);

That she will not participate in any aspect of the program she is uncomfortable with or considers unsafe.

That should she choose to participate, is aware of the physical nature and possible risks of injury incident to taking this practical course in self defense. That she is physically fit to participate in this course, involving various physical technique and she realizes that self defense techniques cannot be successfully employed in every situation, and proficiency can only be achieved and is dependent upon thorough continued practice, exercising good judgment, and a person's natural abilities.

The undersigned hereby releases Rape Aggression Defense Systems, Inc.. its Founder, Executive Board, Staff and Instructors, and agrees to hold them harmless, from any liability for injury that may be incurred as a result of participate in this course, or using the strategies within for defense.

The undersigned also acknowledges that Rape Aggression Defense Systems, Inc. is not responsible for the selection of trainers, training environments, training procedures or training equipment that an individual Instructor may use during this program.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDER STAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT VOLUNTARILY.

Signature: _____

Date: _____

R.A.D. SYSTEMS
23305 HWY 16
DENHAM SPRINGS, LA 70726
(225) 791-4430

