



TRAINING PARTICIPATION AND WAIVER FORM

COURSE: CCW Initial Course	COURSE NUMBER: CCW	DATE(S):
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- In consideration for the opportunity to participate in the above listed training course, with the intention of binding myself and my successors in interest and assigns, hold harmless from liability and forever discharge Law Enforcement Training & Tactical Institute, Inc., [DBA] Citizen Defense and Training Group and their officers, agents, servants, employees, training instructors, tenants, guests, heirs, legal representatives and assigns, personally and in their official capacities, from all damages, claims, demands, actions, and causes of action of every kind and nature, whether negligent or intentional, both known and unknown, whether accrued or accruing in the future, arising out of, or in any way connected with voluntary participation in this course, including but not limited to instruction, demonstrations, training films, video tape presentations, course materials, hand-out literature, training facilities and firing range(s).
- I understand that engaging in any high-risk training has potential for bodily injury, serious physical harm or death. More particularly, injury or serious physical harm could result from vehicle crashes, slips and falls, lifting, accidental firearms discharge, bending, ammunition malfunction(s), firearm or weapon malfunction(s), ammunition ricochet and splatter, negligent or accidental behavior or action(s) by other student(s) or myself, failure to follow safety guidelines, procedures and fundamental principles, insect bites and stings, aerosol sprays, electric shock, joint manipulation, strikes, kicks, submission holds and strenuous physical exertion.
- I understand and have read the "Training and Safety Rules and Procedures" provided to me and attached to this document, and further, I have read, understand and agree to completely abide by the Law Enforcement Training & Tactical Institute, Inc. [DBA] Citizen Defense and Training Student Code of Conduct Manual, and/or any rules or regulations established, and understand I may be removed from the course, up to and including loss of my tuition and I will reimburse any monies due to damage, negligence or any act on my part that causes harm, injury or damage to person(s), property or thing(s).
- I fully and truthfully acknowledge that I am a legal citizen of the United States and a resident in the State of Ohio; I am 21 years old or older; and I legally meet all requirements, including those stated in the Ohio Revised Code 2923.125, as it pertains to Conceal Carry. I further acknowledge I am not a fugitive of justice, nor am I under indictment, been charged with, or convicted of a felony, under indictment, charged with or convicted of an offense that involves trafficking in drugs, a misdemeanor offense of violence or negligent assault. I further acknowledge I have fully read and understand the "Ohio's Concealed Carry Laws and License Application" booklet, as written by the Ohio Attorney General.
- I have read carefully this waiver and the contents herein and I fully understand the effects of this release, as I request, and voluntarily do so, to participate in this training. I acknowledge that no threats, promises, inducements, or any other agreements have been made between the Law Enforcement Training & Tactical Institute, Inc. [DBA] Citizen Defense and Training Group and myself. This waiver contains the entire agreement between the Law Enforcement Training & Tactical Institute, Inc. [DBA] Citizen Defense and Training Group and myself.

Printed Name:	Signature:	Date:
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