## **PARENTAL CONSENT FORM**

ORO VALLEY WOMEN'S

I authorize my daughter
, to attend upcoming physical
defense course offered by an Instructor certified to teach the Oro
Valley Police Department Self Defense Program at
My signature below hereby acknowledges to the Town Of Oro Valley Staff and Instructor(s);
That my daughter will not participate in any aspect of the program she is uncomfortable with or considers unsafe.
That my daughter and I are 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 techniques; and that she realizes that self-defense techniques cannot be successfully employed in every situation, and proficiency can only be achieved and is dependent upon a thorough continued practice exercising good judgement, and a person's natural abilities.
The signatures below hereby release the Town of Oro Valley to hold them harmless, from any liability for injury that may be incurred as a result of participation i this course, or using the strategies within for defense.
I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT VOLUNTARILY.
Signature of Legal Guardian
Signature of Student
Telephone Number for Confirmation
Data