

The Grossman Method© Private Session Waiver

Informed Consent, Liability Waiver, Indemnification and Agreement for Emergency Medical Treatment

I voluntarily consent to participate in this session. I acknowledge and understand that it is my sole responsibility to consult with a physician prior to participating, and to decline, decrease or cease participation in the event of illness, injury or other medical condition. I understand that Hal Grossman or his assistants may reduce or stop my participation in the best interest of my safety and well being. I understand that it is solely my responsibility to seek and receive insurance, medical evaluation and treatment for any symptoms that may arise out of or are related to my participation. I acknowledge and understand that Hal Grossman will not provide insurance. I further abide by all policies of the hosting institution, should they exist for my session.

I understand that injury or medical conditions are inherent risks associated with recreation activity. Propensity for injury depends on the individual fitness, conditioning, experience, as well as the nature of the activity and degree of reasonable and expected contact. Injuries may include, but are not limited to, loss of wind, muscle cramps, sudden illness, abrasions, loss of consciousness, heat stroke, heat exhaustion, injuries to muscles, ligaments, tendons, and joints of the body, such as shoulder, rotator cuff, arms, lower back, knees, legs and ankles, broken bones, or stoppage of breathing. I further understand that medical conditions may include, but are not limited to, abnormal blood pressure, fainting, dizziness, disorders of the heart, and rare instances of paralysis, stroke, or death. In the event of a medical emergency, I hereby consent to transportation and emergency medical treatment arising out of or relating to participation in this workshop.

In consideration of all of the notices contained herein, it is my express desire to participate in this workshop at my own risk. In consideration of my participation in the activities and use of its facilities and equipment, I hereby voluntarily release, hold harmless, and forever discharge Hal Grossman and his assistants of all of the above, on behalf of myself and my successors and assigns, from any and all liability for injuries or damages I may incur or cause in connection with or arising out of my participation in this workshop. By signing below, I acknowledge that I have read and understand this document in its entirety and hereby voluntarily consent to all of its provisions.