

**CONSENT TO PARTICIPATE, RELEASE, AND MEDICAL AUTHORIZATION  
ALL PARTICIPANTS MUST READ AND SIGN EACH OF THE FOLLOWING STATEMENTS**

**PARTICIPANT:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

The undersigned certifies that the individual is a current member of the USFA or if participating under a trial membership will join USFA(online membership) as a non-competitive member (at a minimum) within 7 days in order to continue fencing at TFA.

**WAIVER OF LIABILITY**

For and in consideration of and any department, organization or group affiliated therewith permitting PARTICIPANT to enroll in and participate in a fencing tournament or practice, PARTICIPANT, by signing below, hereby voluntarily indemnifies, releases from liability and holds harmless TEXAS FENCING ACADEMY hereinafter TFA for any accident, injury, illness, death, loss, attorneys fees, damage to person or property, or any other consequences suffered by PARTICIPANT or any other person arising or resulting directly or indirectly from PARTICIPANT’S participation in any competitions or workouts. In the event that PARTICIPANT is injured, PARTICIPANT agrees to assume any financial obligation, either through PARTICIPANT’S personal health insurance, or through some other means, for any medical cost which PARTICIPANT incurs. TFA assumes no responsibilities for any medical expenses, injury, or damage suffered by PARTICIPANT in connection with the use of any TFA facilities or services in connection with any of the fencing tournaments or practice. PARTICIPANT further agrees to conform to all rules, regulations and policies adopted by TFA relating to all competitions. IT IS THE INTENTION OF PARTICIPANT BY SIGNING BELOW TO EXPRESSLY ASSUME ALL RISK OF INCLUDING BUT NOT LIMITED TO PERSONAL INJURY, DEATH, OR PROPERTY DAMAGE UPON HIM/HERSELF, TO THE EXCLUSION OF TFA AND TO EXEMPT AND RELIEVE TFA FROM LIABILITY INCLUDING BUT NOT LIMITED TO FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH. PARTICIPANT further agrees that PARTICIPANT, his/her spouse, assignees, heirs, executors, administrators, guardians, and legal representatives will not make any claims against, sue or attach the property of TFA for any loss or damage resulting from PARTICIPANT’S participation in the fencing competitions. PARTICIPANT IS AWARE OF THE POTENTIAL DANGERS INCIDENTAL TO ENGAGING IN FENCING FURTHERMORE, PARTICIPANT IS ALSO AWARE, THIS IS A RELEASE OF LIABILITY, A WAIVER OF THE PARTICIPANT’S LEGAL RIGHT TO COLLECT DAMAGES IN THE EVENT OF INJURY, DEATH OR PROPERTY DAMAGE AND A CONTRACT BETWEEN PARTICIPANT AND TFA AND PARTICIPANT SIGNS IT OF HIS/HER OWN FREE WILL. PARTICIPANT ALSO ACKNOWLEDGES HE/SHE IS OVER THE AGE OF 18, OF SOUND MIND, AND HAS NOT BEEN COERCED IN ANY WAY TO SIGN THIS WAIVER OF LIABILITY AND CONSENT FORM. THE UNDERSIGNED ALSO CERTIFIES HE/SHE IS COMPLETELY COMPETENT AND AUTHORIZED TO EXECUTE THIS RELEASE AND THAT HE/SHE HAS FULLY READ AND COMPLETELY UNDERSTOOD THIS WAIVER OF LIABILITY AND CONSENT FORM OR HAS HAD IT EXPLAINED TO HIM/HER.

**EXPRESS CONSENT FOR MEDICAL TREATMENT**

I EXPRESSLY GIVE MY CONSENT FOR THE STAFF AND COACHES OF TFA TO OBTAIN MEDICAL CARE FROM ANY LICENSED PHYSICIAN, HOSPITAL OR CLINIC FOR ANY INJURY OR ILLNESS THAT MAY ARISE DURING ACTIVITIES ASSOCIATED WITH TFA. IN THE EVENT THE PARTICIPANT IS A MINOR, I HEREBY EXPRESSLY GRANT TFA PERMISSION TO ACT AS GUARDIAN FOR THE MINOR PARTICIPANT IN OBTAINING REASONABLE EMERGENCY MEDICAL TREATMENT FOR ANY INJURY OR ILLNESS THAT MAY ARISE DURING THE ACTIVITIES ASSOCIATED WITH TFA. Should it develop that there are any mistakes in this waiver and consent form which cause the waiver and consent form to be defective or less than complete, the undersigned will execute any and all instruments and do any and all things necessary to effectuate a full, final and complete waiver and release of liability. This waiver and consent form contain the entire agreement between TFA and the PARTICIPANT concerning waiver of liability, consent for medical treatment, consent for photography and consent to abide by club policy.

\_\_\_\_\_  
**SIGNATURE OF PARTICIPANT (PARENT/GUARDIAN**

if under 18yrs old)

\_\_\_\_\_  
**PRINTED NAME OF SIGNATORY**

**SEE OTHER SIDE**→→→→→

\_\_\_\_\_  
**DATE**

**Texas Fencing Academy (TFA)  
Code of Conduct**

**ATHLETE PLEDGE**

**As a Member of the Team, I hereby promise and agree that I:**

- have acted and will act in a sportsmanlike manner consistent with the spirit of fair play and responsible conduct;
- will refrain from conduct detracting from my ability or that of my teammates to attain peak performance;
- will respect members of my Team, other teams, spectators and officials, and engage in no form of discriminatory behavior or verbal, physical or sexual harassment or abuse;
- will follow my Team's rules, including by way of example, rules regarding listing TFA as primary club, dress code and tournament preparation;
- agree to be filmed and photographed by the TFA photographer(s) and equipment (ex. CoachesEye, WebCam, etc..)
- will not author, forward, or post offensive notes, texts, photographs, or other content online that reflects negatively on me, my team, or that conflict with the spirit or intent of this Code of Conduct. Whenever possible, I will discourage others from posting vulgar or offensive notes, texts, or photographs of similar content online that could be deemed unflattering or damaging to my, or others', reputation.
- will act in a way that will bring respect and honor to myself, my teammates, my clan and the Klingon Empire.
- will conduct myself as an ambassador for my sport, my clan and the Klingon Empire.
- if a competitive member, will maintain a level of fitness and competitive readiness that will permit me to compete safely and track my training using TimeStation
- Disciplinary action for violation of any provision in this Code of Conduct may include any or all of the following: (i) a verbal or written reprimand; (ii) suspension from the Team; (iii) removal from the Team; or (iv) any combination of the foregoing.

**PARTICIPANTS' AFFIRMATION**

I have read and accept this Code of Conduct. I agree to the rules, guidelines, jurisdiction and procedures stated in these documents as a condition for being a member of the Team.

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**Fencers Signature**

**Date**

**PARENT/GUARDIAN CERTIFICATION  
(For Participants Under the Age of 18 as of Date of Signature)**

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**Signature**

**Date**

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Relationship (Parent or Guardian)