FullForce FITNESS
It's all about you!

Self Defense Workshop for Women & Teens

Learn to protect yourself in more than just one way.

- *Analyze Various Situations*
- *Stun & Run Techniques*
- *Build Awareness & Confidence*

This workshop teaches a knock-out defense against unarmed assailants. You'll learn simple but highly effective techniques from a 2nd degree black belt police officer that will stop an attacker! Learn how to use those techniques on various situations that happen in real life. Get a chance to practice what you've learned on one of our fully padded instructors in our simulated attack scenarios.

2 session dates to choose from:

October 22nd or December 3rd @ 12:30-3:30PM

Classes will be held at FullForce Fitness: 1954 Old Middlefield Rd (Unit I) Mountain View. www.fullforcefit.com

$90 Mountain View Residents $112.50 Non-Residents

Sign-up through the Mountain View Recreation Department
http://online.activenetwork.com/mvrecreation 650-903-6331

class registration form

Customer Service: (650) 903-6331
Fax: (650) 962-1069
E-mail: *recreation@mountainview.gov*

parent / legal adult – main contact:

First Name _____ Last Name _____

Address _____ City _____ Zip Code _____

Home Phone (_____) _____ Work (_____) _____ Cell Phone (_____) _____ E-mail _____

Emergency Contact: _____ Relationship _____ Phone ☐ Home ☐ Cell (_____) _____
First Last

payment: ☐ **Cash** (please do not mail cash) ☐ **Check** *(payable to "City of Mountain View")* ☐ **Visa** ☐ **MasterCard**

Credit Card # ___ ___ ___ ___ - ___ ___ ___ ___ - ___ ___ ___ ___ - ___ ___ ___ ___ Expiration Date ___ /___

Name as it appears on Credit Card _____ **Cardholder Signature X** _____

participant name – first and last	birthdate	gender	grade	class #	class name	fee	alternate class #
						$	
						$	
						$	
						$	
						$	
						$	
						$	
Mail / Drop-Off Registrations Only: Separate check required for each class.					**Total**	$	

List any Allergies, Medication(s), Health Concerns, or Special needs: _____
Participant's Name _____

photo release: By affixing my initials here: _____ I DO NOT agree nor grant the City of Mountain View permissions to use my and/or my child's photograph or likeness, or that of a pet or personal property, for promotional use in any City related media.

waiver & release: In consideration of participation in a class or activity offered by the Recreation Division of the City of Mountain View, I, the below signed, agree to indemnify and hold the City of Mountain View harmless and hereby waive, release and discharge any and all claims for loss or damage, for death, personal injury, bodily injury or property damage which I may have or which hereinafter may accrue to me against the City of Mountain View, its City Council, employees, agents, and volunteers for any liability arising out of or connected in any way with my participation in this class or activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above. I understand that accidents and injuries can arise from participation in this class or activity; knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of myself, my heirs and assigns and to release and to hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. Further, I understand that the City of Mountain View, its City Council, employees, agents and volunteers, are not responsible for the personal property of the participants in the class or activity. It is further understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on me and on my heirs and assigns. I have read and agree to the registration and program policies. By my signature below, I acknowledge that I have read this document and understand its contents.

Signature: X _____ Date _____ ☐ **Parent** ☐ **Legal Guardian** ☐ **Participant** **City Employee #/Dept.:** _____

MOUNTAIN VIEW RESIDENTS: MUST PROVIDE ONE ACCEPTABLE PROOF OF RESIDENCE. INCOMPLETE REGISTRATION FORMS WILL NOT BE PROCESSED.