

Liability Release Form

I, _____, HEREBY ASSUME ALL RISKS OF PARTICIPATING IN ANY/ALL DRIVER'S EDUCATION ACTIVITIES being conducted at Confident Driving Academy LLC, including by way of example and not limited to, any risks that may arise from negligence or carelessness of the parties being released, from dangerous or defective equipment or property owned, maintained, controlled by them, or because of their possible liability without fault.

I certify that I am physically fit and have not been advised to not participate in Driver's Education or related activities by a medical professional. I certify that there are no health-related reasons which preclude my participation.

I acknowledge that this Liability Release will be used by Confident Driving Academy LLC and its affiliates, and that it will govern my actions and responsibilities while participating in activities at CDA.

I hereby take action for myself, my executors, administrators, heirs, next of kin, successors and assigns as follows:

- (1) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from CDA, THE FOLLOWING ENTITIES OR PERSONS: Confident Driving Academy, its owners, directors, instructors, employees, and affiliates;
- (2) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE The entities or persons mentioned in this contract from any and all

liabilities or claims made, whether caused by negligence or otherwise.

I acknowledge that these activities may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, weather, equipment, vehicular traffic, and actions of other people.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during the Driver Training.

I understand that while participating, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose (such as the CDA Facebook and Instagram accounts, or website) by Confident Driving Academy LLC and its affiliates.

I CERTIFY THAT I HAVE READ THIS DOCUMENT IN ITS ENTIRETY AND UNDERSTAND ITS CONTENT. I AM AWARE THIS IS A RELEASE OF LIABILITY AND CONTRACT.

Releasor's Name (print)

Releasor's signature (or parent/guardian if participant is under 18)

Releasee's Signature

Date