



AMERICAN FENCING COALITION, LLC

Waiver Rule and Regulations Form

This form must be signed by all members and non-members.

Last/First Name: _____

Parent/Guardian Name: _____

Home Phone: _____ Mobile Phone: _____

Applicants Email _____ Parent/Guardian Email: _____

Weapon _____ USFA member: Yes/No

I agree, understand and accept upon entering American Fencing Coalition, LLC, that I will abide by all the Rules/Regulations that were provided to me as well as I understand that participation in any sport is a risk as well as could cause serious injury and I hold harmless American Fencing Coalition, LLC and all their representatives from all and any liability.

Signature Date: _____

Parent/Guardian Signature (Required if under 18 years) Date: _____

See Attached Rules/Regulations