



LAKE PLACID POLICE DEPARTMENT
 8 North Oak Avenue, Lake Placid, Florida 33852
 Telephone 863-699-3759 Fax 863-699-3760 www.lppd.com



SELF DEFENSE REGISTRATION / RELEASE FORM

Name _____

Address _____ City _____ State _____ ZIP _____

EMAIL _____

Date _____ Primary Instructor _____

NSDI/SAFE PROGRAM LOCATION _____

I, _____ the undersigned, having agreed to participate in the National Self-Defense Institute NSDI/SAFE. PROGRAM, acknowledge that I have been fully informed as to the details of the course; that although it is not a physical self-defense course it involves physical activity limited in nature, all of which has been explained to me and which I understand. I further acknowledge that the training is rudimentary and does not provide the proficiency that would be more attainable from a basic physical self defense course, and is dependent on continued practice, the exercise of good judgment and a person's natural abilities.

I do hereby release the Town of Lake Placid and the Lake Placid Police Department its employees, representatives, and agents, and the National Self-Defense Institute, Inc.(a not-for-profit corporation), any of its officers, directors, members, program partners, agents, volunteers, program participants, sponsors, instructor(s), and employees, from any and all liability of whatsoever nature in any way related to the participation in the NSDI/SAFE PROGRAM whether during the training or thereafter.

Signature _____ Date _____





Date _____ Instructor _____

1. Report any injury or discomfort to your Instructor immediately. If something does not “feel right” report it.
2. Please do not exert yourself in any way during this program.
3. Make eye contact with your Instructor and advise them of your condition when “Wellness Checks’ are conducted.
4. Ask questions when something is not clear to you.
5. Never use more than light touch contact on training props during this program.
6. Weapons are not permitted in the training environment. This includes but is not limited to pepper sprays, electronic devices, key chain impact devices, firearms and/or their ammunition.

Print Name _____ Signature _____