

John Kelley Golf LLC
Golf Instruction Release of Responsibility

Name _____ Date _____

Mailing Address _____

City _____, State: _____ Zip: _____

Phone: _____ Email: _____

DOB ____/____/____

The undersigned client, acknowledges and understands that the client's participation in the golf instruction program that is the subject of the foregoing golf instruction Release of Responsibility document, may place the client at risk of physical injury and other damage and loss, resulting from the acts, or failures to act, of the client, the instructors, the instructional facilities, or third parties. Having such knowledge in mind, the client does hereby voluntarily accept the risk of such injury, damage, and loss, and in consideration of the benefits to client from said golf instruction program, and other good and valuable consideration, receipt of which is hereby acknowledged, does hereby release and forever discharge John Kelley Golf LLC, John Kelley, golf instruction/fitness facilities, and their respective marital communities, successors, heirs, contractors and assigns of and from all manner of actions, causes of action, claims, suits, and demands whatsoever, which client has or may have by participation in the said golf instruction program including without limitation, death, personal injury, bodily or mental injury, economic loss and damages of any of the instructors, the golf instruction/fitness facilities, their employees and agents.

I hereby acknowledge that I have read and understood the terms and conditions as provided in the Golf Instruction Release of Responsibility document and I agree to all of the terms herein,
_____ (INIT)

PARTICIPANTS SIGNATURE

DATE

GOLF INSTRUCTORS SIGNATURE

DATE