



# Historical Armored Combat Sports Association HACSA

---

## HACSA CONSENT FORMS

### **SIGNATURES:**

Your signature below indicates that you have read, signed, agree to and will abide by:

1. Society Bylaws
2. Injury and Liability Waiver Form
3. Code of Conduct Form
4. Social Media Policy

with all the terms, conditions and statements therein. Other HACSA policies including harassment, confidentiality and conflicts of interest may be viewed upon request.

Your signature below also defines consent to being photographed or filmed while engaged in activities with/for the Historical Armored Combat Sports Association for use in promotional or training purposes and all content becomes the property of the Historical Armored Combat Sports Association.

\_\_\_\_\_  
Signature of Member  
(Signature is for Members 18 or Older)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Member

### **Parent or Guardian Signature for Subjects age 5-17 (if applicable):**

Your signature below indicates that you have been informed about your child's participation in this activity and your anticipated involvement as a parent or guardian and accept and understand the risks involved.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian