Florida Armored Combat

Knights Full-Contact Combat Waiver — Adult

Version 1.0 | October 12, 2026

This agreement is for adults age 18 or older. Read it before signing. FAC means Florida Armored Combat. Covered parties are FAC, its member teams, participating partners, coaches, volunteers, organizers, sponsors, and venue owners involved in the stated activity. This agreement does not authorize an activity outside its stated scope.

Your details

Full Legal Name

Email Address

Primary Phone Number

Team or Organization (optional) (optional)

Event or Practice Name

Event or Practice Date

Emergency contact

Emergency Contact Full Name

Emergency Contact Phone Number

Share with the coach any condition or injury that may make participation unsafe. Do not include detailed medical histories here. Staff may stop participation or ask for medical clearance.

Allowed combat and increased risks

This agreement covers staff-approved full-contact armored training, steel-weapon practice, and buhurt competition. Permitted categories, techniques, targets, and contact intensity are determined by the published rules for that session or event. No signature alone authorizes entry into the combat area.

I understand the added risks of forceful weapon strikes, kicks or grappling where permitted, group collisions, falls, restricted vision or movement, broken or displaced armor, and heavy equipment. Possible outcomes include concussion or other brain injury, fractures, crushing injury, serious neck or spinal injury, paralysis, permanent disability, or death. Exertion and heavy armor increase heat exhaustion, dehydration, and heat-stroke risks.

Equipment approval is a separate staff decision

Before contact begins, an authorized coach or marshal must inspect and approve my armor, helmet, protection, weapons, and shields for the exact combat category under the event's published rules and equipment requirements. The inspection record must identify the ruleset/version, inspector, date, equipment checked, and pass/fail decision. I must present personal and borrowed gear and disclose damage, repairs, modifications, or restrictions. Any failed item must be removed, repaired, and reinspected before use.

I will maintain equipment, check closures and fit, report changes, and request reinspection after damage or equipment changes. An earlier inspection, a seller's description, or my own belief does not establish current approval. Soft-kit, costume, decorative, reenactment, or LARP equipment is not automatically suitable for buhurt.

FAC has not yet adopted a universal definition or certification mark for "buhurt rated." This agreement does not create one. Until FAC adopts that standard, the governing session/event rules and a documented inspection determine eligibility. Inspection reduces risk; it does not guarantee safety.

Conduct and health

I will follow staff instructions, stop calls, sportsmanship requirements, and the governing rules. I will not use prohibited techniques or targets, participate while impaired, conceal unsafe equipment, or continue after suspected concussion, serious injury, or heat illness. I will report symptoms promptly. Return to participation requires applicable medical and staff clearance. Staff may deny or stop participation despite a signed waiver.

Assumption of risk and release

I choose to participate and accept the risks described in this agreement, including injury, property damage, permanent disability, or death. Risks can arise from my conduct, other people, equipment failure, conditions at the venue, or ordinary negligence of the covered parties. Safety rules and supervision reduce risk but cannot eliminate it.

RELEASE OF ORDINARY NEGLIGENCE: To the extent Florida law permits, I release the covered parties from claims for injury, death, or property damage arising from this activity, including claims caused by their ordinary negligence or negligent first aid or rescue. This does not release gross negligence, intentional misconduct, or any responsibility that law does not allow to be released.

I am responsible for damage or harm I cause by deliberately breaking safety instructions or by my own negligent conduct, to the extent the law requires. I will not seek reimbursement from the covered parties for risks I validly release here. This does not require me to cover another person's gross negligence or intentional misconduct.

I authorize staff to request emergency help if needed. I remain responsible for my medical expenses. This does not authorize non-emergency treatment without consent or replace instructions from medical professionals.

If one provision cannot be enforced, the remaining provisions continue to apply. Florida law governs; disputes will be brought in a court in Florida with proper jurisdiction. I may ask questions before signing and may decline to participate.

Participant media permission

For photographs, video, audio, and other recordings of me made at FAC public events or FAC-hosted or FAC-sponsored activities covered by this agreement, I permit FAC, FAC member teams, and FAC's authorized event/media partners to use my name, image, voice, and likeness for FAC-related promotion, education,

recruitment, event coverage, and advertisements, including paid advertising. Partners may use the material to promote FAC, participating teams, and the associated partnership; unrelated advertising needs separate permission.

I permit reasonable editing, captions, cropping, and combining recordings with other material. Use must not falsely suggest I endorse an unrelated product or misrepresent my conduct. I do not receive payment or approve each use unless a separate written agreement says otherwise. FAC does not receive rights to someone else's copyright merely because I sign this likeness permission.

Permission applies to recordings made from signing through the stated event or practice. Existing authorized uses may continue afterward. A written request to sign@flarmored.org to stop future new uses will be considered; FAC cannot promise removal of copies already distributed by third parties. This permission does not cover private medical details or emergency-contact information.

Review and sign

Review your name, email, phone, event details, and emergency-contact details before signing. Select a filled field to correct it. The same saved value is used wherever a detail appears again.

☐ I am at least 18, have reviewed my information, understand the activity limits and media permission, and choose to sign this agreement.

Participant Signature

Signature Date

My electronic signature has the same intended effect as my handwritten signature. A completed copy and audit record will be retained in DocuSeal, sent to sign@flarmored.org, and sent to my email. Contact details are used for administration and safety. An event-day roster may show my name and completed waiver types; it will not show my email, phone, emergency contact, or signature. A waiver does not replace staff check-in or approval.