

**Tuesday and Thursday Nights  
Begins Tuesday, October 17, 2017  
Ends Thursday, November 16, 2017  
Two Sessions for Women age 18-55:  
Session I, 6–7:30 PM or  
Session II, 7:45–9:15 PM**

All applicants must undergo a background inquiry prior to consideration.

Greenwich resident applicants will receive priority consideration.



# WOMEN'S SELF-DEFENSE CLASSES

Learn proven techniques and bolster your confidence in self-defense situations.

Identify your physical and psychological limitations and learn to overcome both.

All classes taught by certified police instructors and held at Greenwich Police Department Headquarters.

\$35.00 registration fee (includes class completion certificate and a T-shirt)

For registration and inquiries, contact Sgt. John Thorne of the Greenwich Police Department Community Impact Section: [JThorne@GreenwichCT.org](mailto:JThorne@GreenwichCT.org)



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ASSOCIATION



**GREENWICH POLICE DEPARTMENT**

Police Administration Building  
11 Bruce Place  
Greenwich, CT 06830  
Phone (203) 622-8000  
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# Press Release

**Contact:** Sgt. John Thorne  
**Phone:** (203) 622-3660  
**JThorne@GreenwichCT.Org**

**FOR IMMEDIATE RELEASE**  
**September 5, 2017**

## **Women's Self –Defense Class** **Fall 2017**

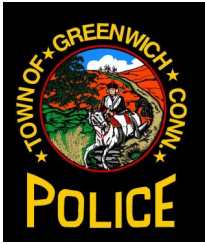
The Greenwich Police Department is currently accepting applications for the 2017 Fall Women's Self Defense Class. The 5-week program is open to female applicants between 18-55 years of age. Session 1 meets twice a week on Tuesday and Thursday from 6.00PM to 7:30PM. Session 2 meets twice a week on Tuesday and Thursday from 7:45PM to 9:15PM. Each session is limited to twenty students.

The class begins on October 17, 2017 and graduation is tentatively scheduled for November 16, 2017.

The Women's Self –Defense Class enables *Participants* to learn proven techniques that will both bolster their confidence in self-defense situations and overcome physical /psychological situations.

Applications are available at [www.GreenwichCT.Org](http://www.GreenwichCT.Org). Completed applications along with a Photocopy of Identification may be returned to the front desk at Police Headquarters to the attention of the Community Impact Office.

Instructors for the program are highly-trained and experienced Greenwich Police Officers. Any further questions can be directed to the Greenwich Police Community Impact Office at 203-618-8307



Greenwich Police Department  
**Community Impact Section**  
**11 Bruce Place, Greenwich CT 06830**  
**Self Defense Training Application**  
**2017 Fall Session**



Applicants ***MUST*** provide a ***PHOTOCOPY OF THEIR MOTOR VEHICLE OPERATORS LICENSE*** or ***other official form of identification*** with this completed form along with a check for \$35.00 made payable to the *Silver Shield Association*. Applications submitted without identification or check will be rejected.

<u>Print Name (Last, First, Middle)</u>	<u>Date of Birth</u>
<u>Address</u>	<u>Email</u>
<u>Telephone Number</u>	<u>Tee Shirt Size (Women's S, M, L, XL)</u>

The 5 week program starts on October 17, 2017 and is open to female applicants between 18-55 years of age.  
The class is twice a week, Tuesdays and Thursdays, 6-7:30PM or 7:45-9:15PM. Class is limited to 20 students.

Indicate which session you will attend:

Session 1 - 6:00PM-7:30PM\_\_\_\_\_ Session 2 - 7:45PM-9:15PM\_\_\_\_\_

Have you suffered any injuries requiring medical attention in the past 12 months?  
**YES** **NO**

Are you prescribed any medication which may impair reaction time or judgment?  
**YES** **NO**

Are you aware of any health problems that you have that prohibit you from participating in any sport or physical activity?  
**YES** **NO**

Are you aware of any health problems that you have that, in the interest of you safety, that the Greenwich Police Department should be advised of?  
**YES** **NO**

Have you studied martial arts before? **YES** **NO**

**If Yes,** What style\_\_\_\_\_ Level Achieved\_\_\_\_\_

Number of years studied\_\_\_\_\_ Place of Instruction\_\_\_\_\_

## Waiver and Release of Liability

In consideration of the Greenwich Police Department furnishing services and/or equipment to enable me to participate in self-defense training,

I fully understand and acknowledge that the activities I undertake in connection with self-defense training have inherent risks, dangers and hazards, my participation in such activities may result in injury or illness including, but not limited to, bodily injury, bruises, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability, these risks and dangers may be caused by the negligence of volunteers, the negligence of the participants, the negligence of others, accidents, the forces of nature or other causes. Risks and dangers may arise from foreseeable or unforeseeable causes including, but not limited to, the trainer's decision making, the acts or omissions of other participants in the self-defense training class and such other risks, hazards and dangers that are integral to the activities that take place in a self-defense training and physical skills atmosphere; and by my participation in these activities and/or use of equipment,

I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the participants, volunteers, instructors, or by any other person.

I, on behalf of myself and my parent/guardian hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify the Town of Greenwich and members of the Greenwich Police Department from any and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of equipment or my participation in any and all activities of this class. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the participants, volunteers, instructors, or by any other persons

I have read the above waiver and release with my parent/guardian, and by signing below, I hereby agree to its terms. It is my intention to exempt and relieve the Town of Greenwich and the Greenwich Police Department from liability for personal injury, property damage or wrongful death caused by negligence or any other cause.

Participant: \_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

<u>Section Sergeant Signature</u>	<u>Date Received GPD Use ONLY</u>	<u>Approved:</u> YES NO