

- If you are a female 14 and older here is an opportunity for a basic self-defense training.
- If you are **under age 18 you must have a female parent or guardian attend with you.**
- Must bring waivers to participate
- Wear comfortable clothes and shoes
- This is extremely physical but you will learn a great deal
- **DEADLINE for registration-forms will be October 20th.**

R.A.D Training

STOP!



- Lunch will be 30 mins and it will be provided.
- Be prepared this is going to be physical. You go at your own level.
- You will be encourage to participate but not forced.
- If you have any questions please feel free to call or email.

R.A.D Training

October 27, 2017
Ponca Tribal Affairs building
9am-2pm

Contact Information:
Crystal Springer, Pathways Program Coordinator
580-352-2606
Crystal.springer@ihs.gov
Fax 580-762-3413



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**Will you
Survive an
Attack?**

R.A.D.

Basic Physical Defense Training for Women

What is R.A.D.?

The R.A.D. System was designed to develop and enhance the options of self defense, so they become viable considerations to the woman who is attacked.

The Rape Aggression Defense Systems is a program of realistic, self-defense tactics and techniques. The R.A.D. System is a comprehensive course for women that begins with awareness, prevention, risk reduction and avoidance, while progressing on to the basics of hands-on self defense training. R.A.D. is not a martial arts program.

Courses are taught by certified R.A.D. instructors and consist of 12 hours of hands-on training. This is a no-nonsense, practical self defense program that offers advanced self defense courses that build upon the Basic Physical Defense System. The Rape Aggression Defense System is the only program that offers a **LIFETIME** return and practice policy anywhere in the United States or Canada.

Fall 2017 Class:

**Friday
October 27, 2017
9am to 2pm**

Class will be held at the
**Ponca Tribal Affairs Building,
Dining Hall
20 White Eagle Drive
Ponca City, OK 74601**

***Limited Space is available—so
enroll today!***

Show up or Enroll by Contacting :
Crystal Springer— 580-762-3421 or
crystal.springer@ihs.gov

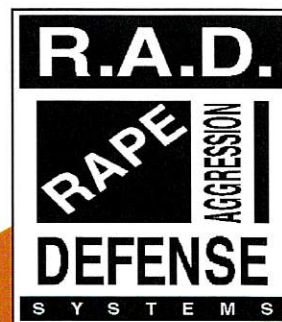


Presented By:

Nationally certified Instructors of the

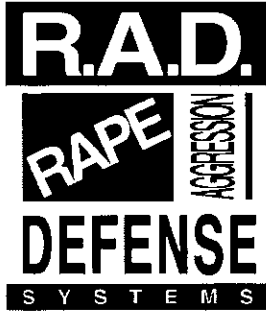
OSU Police Department

www.osupd.okstate.edu



www.rad-systems.com/ok.html

PARENTAL CONSENT FORM



I _____, authorize my daughter, _____, to attend the upcoming physical defense course offered by an Instructor certified to teach the R.A.D. Self Defense Program at _____, on _____.

My signature below hereby acknowledges to Rape Aggression Defense Systems, Inc. its Founder, Executive Board, Staff and Instructor(s);

That my daughter will not participate in any aspect of the program she is uncomfortable with or considers unsafe.

That my daughter and I are aware of the physical nature and possible risks of injury incident to taking this practical course in self defense. That she is physically fit to participate in this course, involving various physical techniques; and that she realizes that self defense techniques cannot be successfully employed in every situation, and proficiency can only be achieved and is dependent upon thorough continued practice, exercising good judgement, and a persons natural abilities.

I also acknowledges that it is very possible that at some period in her training, she may on some occasion, unknowingly or otherwise, practice with another participant who is HIV positive, or infected with another blood borne pathogen. She may also be inadvertently exposed to bleeding or blood in the workout area. There is no way to predict, or entirely prevent this. In as much, participant and guardian agree to assume all the foregoing risks and accepts personal responsibility for conditions and damages associated with such contact.

The signatures below hereby release Rape Aggression Defense Systems, Inc., its Founder, Executive Board, Staff and Instructor(s), and agrees to hold them harmless, from any liability for injury that may be incurred as a result of participation in this course, or using the strategies within for defense.

The signatures below also acknowledge that Rape Aggression Defense Systems, Inc. is not responsible for the selection of trainers, training environments, training procedures or training equipment that an individual Instructor may use during this program.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT VOLUNTARILY.

Signature of Legal Guardian _____

Telephone Number for Confirmation _____

Date _____

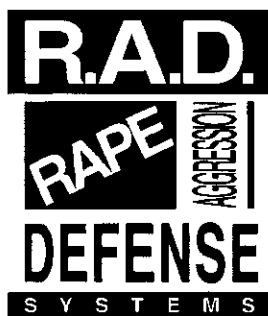
Signature of Student _____

Date _____



REVISED 7/2013

R.A.D. SYSTEMS
1406 S. Range Ave. Suite 1
Denham Springs, LA 70726
(225) 791-4430



®

REGISTRATION AND RELEASE FORM

Name: _____

Address: _____

State and Zip: _____

Course: _____ Date: _____

Location: _____

Primary Instructor: _____

**RELEASE FOR RAPE AGGRESSION DEFENSE SYSTEMS
PHYSICAL DEFENSE SYSTEM**

The undersigned hereby acknowledges to Rape Aggression Defense Systems, Inc., it's Founder, Executive Board, Staff and Instructor(s);

That she will not participate in any aspect of the program she is uncomfortable with or considers unsafe.

That should she choose to participate, is aware of the physical nature and possible risks of injury incident to taking this practical course in self defense. That she is physically fit to participate in this course, involving various physical techniques, and she realizes that self defense techniques cannot be successfully employed in every situation, and proficiency can only be achieved and is dependent upon thorough continued practice, exercising good judgement, and a persons natural abilities.

She also acknowledges that it is very possible that at some period in her training, she may on some occasion, unknowingly or otherwise, practice with another participant who is HIV positive, or infected with another blood borne pathogen. She may also be inadvertently exposed to bleeding or blood in the workout area. There is no way to predict, or entirely prevent this. In as much, participant agrees to assume all the foregoing risks and accepts personal responsibility for conditions and damages associated with such contact.

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I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT VOLUNTARILY.

Signature _____

Date _____



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