



722 Main Street, Canon City, CO 81212 **719-276-0393** www.shorinkanfamilykarate.com

Registration - Please print clearly:

Student's Name _____ Today's Date _____
 Mailing Address _____ City _____ Zip _____
 Age _____ Date of Birth _____ Email _____
 If under 18 - Father _____ Mother _____
 Guardian _____
 Best phone # _____ Alternate phone# _____
 Medical Alert(s) _____ Doctor _____
 How did you hear about us? _____ Why are you interested in training
 in karate? _____

****Please keep this information current** ~ Please read the following and sign~**

This registration form is for the free week of Regular Karate, Lil' Dragons or Self Defense Classes. If I decide to join, this registration form then becomes my permanent registration. I understand and agree that all instruction, services, use of equipment and any facilities (also traveling to and from any activity) sponsored by **SHORINRYU SHORINKAN FAMILY KARATE, LLC (hereinafter called SSFK-LLC)** shall be at my own risk. **SSFK-LLC**, its instructors, or any facility used for instruction, or its owners shall not be liable for any claim, demand, inquiry, expense, damage action or cause of action, arising out of or connected with the use of any of the services or facilities of **SSFK-LLC**. I have read and will abide by all dojo rules.

I hereby agree to my new responsibilities as a student of **SSFK-LLC**. I will be punctual to class. I understand my **MEMBERSHIP FEES** are **DUE** by the **25th of each month** for the following month's membership (unless prior arrangements have been made). There is a **late fee of \$10.00** if not paid by the **First**. I understand the importance of using what I learn in a **POSITIVE WAY** both in and outside of the dojo. I acknowledge that each class begins with prayer and the pledge of allegiance and that my participation is voluntary. If I choose not to participate in these activities, I agree to remain respectfully quiet when they are taking place. My membership may be terminated at the discretion of the head instructor based on my conduct with **NO REFUND**. I am required to give a **30 day written notice** if I decide to discontinue my training with **SSFK-LLC** and **will be responsible** for membership dues until I give such notice. I will receive invoices and continue paying membership dues until I give such notice. I agree to allow pictures/video of myself and/or my family to be taken and used for promotional purposes such as on the **SSFK** website. I do wish to participate as a student of **SSFK-LLC**. I agree to all the terms of this agreement and hereby agree to hold **SSFK-LLC**, or any facility, its owners and all instructors harmless from and against any and all liability for any injury which may be suffered arising out of or in any way connected with participation of this activity.

 Student's signature Date

 Parent's (Guardian) signature Date
 (Required if under 18 years old)

SIGNATURE REQUIRED IN ORDER TO PARTICIPATE
PLEASE COMPLETE ATTACHED Release and Waiver of Liability and Indemnity Agreement.
A registration form and Release and Waiver of Liability form needs to be completed for each family member.

Office Use - V.C. ___ W.C. ___ P.C. ___ P.M. ___ S.M. ___ A.R. ___ B.D. ___ B.R. ___ K.R. ___ R.R. ___ M.O. ___ Q.B. ___ F.R. ___

Release and Waiver of Liability and Indemnity Agreement

(Read Carefully Before Signing)

In consideration of being permitted to participate in any way in the Martial Arts Program indicated below and/or being permitted to enter for any purpose any restricted area (here in defined as any area where in admittance to the general public is prohibited). The parent(s) and/or legal guardian(s) of the minor participant named below agree:

1. The parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating in the below martial arts activity or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agree that, if at any time, I feel anything to be UNSAFE; I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
2. I/We fully understand and acknowledge that:
 - a. There are risks and dangers associated with participation in martial arts events and activities which could result in bodily injury partial and/or total disability, paralysis and death.
 - b. The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe.
 - c. These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releasees named below.
 - d. There may be other risks not known to us or are not reasonably foreseeable at this time.
3. I/We accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releasees named below.
4. I/We HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the martial arts facility used by the participant, including its owners, managers, instructors, promoters, lessees of premises used to conduct the martial arts event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions or instructions to engage in risk evaluation or loss control activities regarding the martial arts facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purpose herein referred to as "Releasee" ... From all liability to the undersigned, my/our personal representatives, assigns, executors, heirs and next of kin For any and all claims, demands, losses or damages and any claims or demands therefore on account of any injury, including but not limited to the death of the participant or damage to property, arising out of or relating to the event(s) caused alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
5. I/We HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of the UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the Law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
7. On behalf of the participant and individually, the undersigned partners(s) and/or legal guardian(s) for the minor participant executes this Waiver and Release. If, despite the release, the participant makes a claim against any of the Releasees, the parent(s) and/or legal guardian(s) will reimburse the Releasee for any money which they have paid to the participant or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Martial Arts School: Shorin-ryu Shorinkan Family Karate, LLC – Canon City, CO, Any School Locations / Facilities Used / Special Event Locations / Rental Properties, etc.

Participant Signature _____ Date _____

Participant Printed Name _____

Parent or Guardian Signature (if minor) _____ Date _____

Printed Name of Parent or Guardian _____