

RELEASE

I, _____ (print name), do understand and acknowledge that Aikido is a martial art involving strenuous physical activity and bodily contact. No judgment of my skill level or physical health was exercised by Plano Aikido in allowing me to participate in Aikido practice. As a condition to, and in consideration of, the privilege of participating in Aikido practice, I agree and promise to assume all risk and responsibility for any and all injuries of damages suffered by me or caused by third parties to me arising out of participation in Aikido practice wherever occurring.

I hereby agree for myself, heirs and representatives that neither Plano Aikido nor their agents or servants shall be liable for any such claim, demand, damage, injury or loss.

IN WITNESS WHEREOF, I sign and seal this document, which I intend to be a legally binding document and as such I read and understand it fully.

Signature _____ Date _____

(If under 18 years of age)

I hereby agree that if my child or anyone on my child's behalf should claim that Plano Aikido or any of its employees or volunteers is liable for any damages as a result of injuries to my child which occur during the practice of Aikido or during any other use of the facilities or services of Plano Aikido, then I shall hold Plano Aikido and each of its employees and volunteers harmless from such liability and shall defend Plano Aikido and its employees and volunteers against any such claim and shall pay any damages which might be due my child or any other person as a result of injuries to my child.

Parent or Guardian _____

Previous martial arts experience:

Please: Print Legibly

Last Name _____ First _____ MI _____ Birth date ____/____/____

Address _____ City _____ State _____ Zip _____

Daytime Phone () _____ Home () _____

Occupation _____ Gender: Male Female (circle one)

e-mail address: _____

Person to be notified in case of emergency:

Name _____ Phone _____

Address _____ Relationship _____