



## Tae Kwon Do Ottawa

[www.tkdottawa.com](http://www.tkdottawa.com) - Tel 613.899.3456 – email [info@tkdottawa.com](mailto:info@tkdottawa.com)

### Class application / Waiver and Release of Liability

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Brief Medical History:

In consideration of being allowed to participate in our Martial Arts programs, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

(1) The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist: and,

(2) I knowingly and freely assume all risks, both known and unknown, even if arising from the negligence of the releasees or others, and assume full responsibility for my participation; and,

(3) I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from the participation and bring such to the attention of the nearest official immediately; and,

(4) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release and hold harmless Ottawa Tae Kwon Do, their officers, agents, and/or employees, other participants, sponsoring agencies, sponsors, and, if applicable, owners, and lessors of premises used to conduct the event (Releasees), with respect to any and all injuries, disabilities, death, or loss or damage to person or property, whether caused by the negligence of the releasees or otherwise.

(5) I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Participant's Signature \_\_\_\_\_

Date Signed \_\_\_\_\_

Witness Signature \_\_\_\_\_

### **FOR PARTICIPANTS OF MINORITY AGE (under age 18)**

This is to certify that I, as parent / guardian with legal responsibility for this participant, do consent and agree to his / her release as provided above A *Waver and Release of Liability*, from of all Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as Provided in this Waver and Release of Liability form and this form as well being apart of the overall agreement(s).

Signature of parent of guardian \_\_\_\_\_

Date Signed \_\_\_\_\_

Witness Signature \_\_\_\_\_

Your signature does not guarantee instruction or class admittance, all students must be accepted by our club and are subject to release at any time without notice.