



MARTIAL ARTS ACADEMY

STUDENT REGISTRATION RELEASE FORM

Student (1) _____ Date of Birth _____ / _____ / _____ 김

Student (2) _____ Date of Birth _____ / _____ / _____ 법

Student (3) _____ Date of Birth _____ / _____ / _____ 빛

Phone: _____ / _____ / _____

Address: _____ 신

Parent's Name: _____ 음

Parent's Name: _____ 험

Emergency Contact & Name _____ Relationship: _____ 체

Phone: _____ / _____ / _____

Personal Medical Information

All personal medical information will be treated as strictly confidential. Information will be used only in case of emergency, and in consideration of the guests' application for participation in martial arts/activities within the facility.

Are you allergic to any medications or drugs?

① *Student 1* **No** Yes • ② *Student 2* **No** Yes • ③ *Student 3* **No** Yes

If yes, please explain: _____

Do you have any medical/physical conditions that an emergency medical technician or medical worker should know about (for example: recent surgery, diabetes, contact lenses, allergies, asthma, etc.)?

① *Student 1* **No** Yes • ② *Student 2* **No** Yes • ③ *Student 3* **No** Yes

If yes, please explain: _____

Do you have any medical/physical conditions that may affect you or your ability to participate (ie: knee problems, heart condition)?

① *Student 1* **No** Yes • ② *Student 2* **No** Yes • ③ *Student 3* **No** Yes

If yes, please explain: _____

Rules

Regulations

Pledges

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1. I agree to obey all instructions, notices and signs given by instructors and officials of the Martial Arts Academy (MAA LLC). I confirm that I am in good physical condition, free from physical defects and do not hold the instructors or officials accountable of the Martial Arts Academy.
 2. I agree that my actions and behavior will be in good conduct, both on the premises of Islam and the MAA LLC. In the event that my conduct is deemed improper, I shall forfeit any further instructions by staff, as well as forfeit any fees and payments etcetera, which have been paid to the Martial Arts Academy.

3. I fully understand the nature of the program, activity and instructions. Therefore I agree to NOT hold the instructors and officials of the MAA LLC liable in the event of personal injury. I have read the above rules and regulations and agree to accept and comply with them.
4. I understand that mixed martial arts is the systems of unarmed and armed fighting techniques including but not limited to: boxing, kickboxing, muay thai, wrestling, judo, and jiu-jitsu. Gym activities may also include general fitness, weight lifting, stretching, yoga, and strength & conditioning.
5. I understand that the types of injuries may result not only from intentional action, but also from inadvertent action, by myself or others, including the malfunction or failure of any of the equipment or facilities (including but not limited to pads, cages, protectors, punching bags, plyometric boxes, ropes, straps, balls, blocks, kettle-bells, weights, machines, and tumbling mats, etc) and errors or mistakes in instruction or performance of fighting or defense techniques by instructors or students in the facility.
6. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless MAA LLC from any and all claims, demands, or causes of action which are in any way connected with my participation in this activity, or my use of their equipment or facilities, arising from negligence. Should MAA LLC or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs. In the event that I file a lawsuit, I agree to do solely in the state where MAA LLC facility is located, and I further agree that the substantive law of that state shall apply
7. I understand that my physician and I agree I am sufficiently qualified and physically able to participate in the facility or elsewhere. If at any time I believe that event conditions are unsafe or that I am unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
8. I hereby irrevocably release, consent and authorize MAA LLC. and its agents to use my photograph/video/likeness/voice, as it pertains to my participation with MAA LLC in any manner for promotional efforts without expectation of or right to any reimbursement in connection with its use.
9. I understand that these martial arts techniques, formal exercises, conditioning exercises, and other physical activities will require me to engage in strenuous physical exercise and activity, either individually, in participation with other students, instructors at the facility, or with physical objects.
10. By my signature I indicate that I have read, understood, and agreed to this waiver of liability

Signature: _____ *Date:* ____/____/____

(Signature of legal guardian if applicant is less than 18 years old)