

Yung Ho Martial Arts School

THIS AGREEMENT MUST BE SIGNED BY ALL PERSONS WHO WISH TO PARTICIPATE
IN ANY **YUNG HO MARTIAL ARTS** CLASS, PROGRAM, EVENT, OR ACTIVITY.

IN CONSIDERATION OF BEING ALLOWED TO PARTICIPATE IN ANY WAY IN THE CLASSES, PROGRAMS,
EVENTS, AND/OR ACTIVITIES OF YUNG HO MARTIAL ARTS SCHOOL, I,

Participant's Name: _____

Parent/Guardian Name: _____ **Phone:** _____
(of minor / child participant)

Email: _____

Address: _____

Emergency Contact Name(s): _____

Relationship: _____ **Phone:** _____

HAVE READ THE FOLLOWING WARNING, WAIVER, RELEASE, AND ASSUMPTION OF RISK. I FULLY UNDERSTAND ITS CONTENTS, AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HEREBY SIGN IT VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY.

- Recognize and understand that martial arts training is an activity that involves physical contact and that my participation might result in serious injury, including permanent disability, or even death, and severe social, and economic loss.
- Recognize and understand that such risk may be due to not only my own actions, but also the action, inaction, or negligence of others, the regulations of participation, or the conditions of the premises, or of any of the equipment used.
- Recognize that there may be other risks that are not known to me, or to others, or not reasonably foreseeable at this time.
- Agree to inspect the facilities, equipment, and pairings prior to participation. I will immediately inform an instructor if I believe that anything is unsafe or beyond my capability and refuse to participate.
- Assume all of the foregoing risks and accept personal responsibility for any damages that may result from injury, permanent disability, or death.
- Enter martial arts training, activities, and/or competition entirely of my own free will and understand the importance of following the rules of training and competition.
- I certify that I am in good physical condition, and have no disease, injury, or other condition that would impair my performance or physical and mental well-being during intense training, practice, and/or competition.
- Grant permission in case of injury to have a doctor, nurse, athletic, training, or other emergency medical personnel provide me with medical assistance or treatment for such injury.
- Release, waive, discharge and covenant not to sue, Yung Ho Martial Arts School, its affiliated organizations, and governing bodies, their officers, owners, employees, instructors, and personnel, other members of the organizations, participants, supervisors, coaches, sponsoring organizations, or their agents, and if applicable, owners, and leasers of the premises from any and all liability to the undersigned, his or her heirs, and next of kin for any and all claims, demands, losses and damages which may be sustained and suffered on account of injury, including death or damage to property, caused, or alleged to be caused in whole, or in part by the negligence of the releasesees, or otherwise.

Participant's Printed Name
(Parent or Guardian if under 18)

Signature

Date