



Student Information

First Name	Middle Name	Last Name	Nickname
Street Address		City, Province	Postal Code
Emergency Contact (other than parent/s)		Relationship to student	Telephone #
Age	Birthdate (dd/mm/yy)	Gender <input type="checkbox"/> Boy <input type="checkbox"/> Girl	School Name
Is this the first time training in martial arts?		If no, how many years of experience?	
Siblings or Friends who are registered.		Current injuries or minor physical limitations or other medical conditions that should be known:	

Parent/Guardian Information

PARENT/GUARDIAN 1 <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	First Name	Last Name	Custody of Student <input type="checkbox"/> Joint <input type="checkbox"/> Mother <input type="checkbox"/> Father
Street Address <i>(if different from player)</i>		City, Province	Postal Code
Home Telephone #		Cell #	Work/Other #
How would you prefer to be contacted? <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Other: _____		Email address: _____	
PARENT/GUARDIAN 2 <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	First Name	Last Name	Custody of Student <input type="checkbox"/> Joint <input type="checkbox"/> Mother <input type="checkbox"/> Father
Street Address <i>(if different from player)</i>		City, Province	Postal Code
Home Telephone #		Cell #	Work/Other #
How would you prefer to be contacted? <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Other: _____		Email address: _____	

I have read the disclaimer, assumption of risk and waiver and the acknowledgement and consent agreements printed on the reverse side of this form, fully understand the terms of each, understand that I and the student/s have given up substantial rights by signing this form and agreeing to these terms. I sign this form for myself and on behalf of the student and agree to these terms freely and voluntarily and without inducement.

Parent/Guardian Signature: _____

Date: _____



Kazoku Dojo

Traditional Okinawan Goju Ryu Karate

DISCLAIMER, ASSUMPTION OF RISK AND WAIVER: I acknowledge that participation in karate involves contact with considerable force, and risk of severe, permanent physical injury including bruises, scrapes, strained, sprained or torn muscles, tendons or ligaments, broken bones, dislocation of joints, concussion, brain damage, nerve and spinal cord injury, paralysis and death. I WILLINGLY AND VOLUNTARILY ASSUME ALL SUCH RISKS. I willingly and voluntarily agree to comply with the stated and customary terms and conditions for participation and, if participant or I observe any concern in participant's readiness for participation in the EVENTS, I will remove him/her from participation and bring such concern to the attention of the nearest official immediately. I HEREBY RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS, to the fullest extent permitted by law, Kazoku Dojo, its participants, employees, volunteers, officials, sponsors and other representatives and any and all owners, lessors, lessees or other persons or entities allowing, permitting or authorizing the use of facilities by Kazoku Dojo and the agents, employees, officers and directors of said persons or entities ("RELEASEES") from any and all claims, demands, costs, expenses and compensation arising out of or in any way related to an injury or other damage that may result to said participant or to members of my family or my household or individuals I invite or for whom I am otherwise responsible while participating in or present at any of the EVENTS, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. I further acknowledge that Kazoku Dojo is primarily administered by volunteers rather than paid professionals.

I further acknowledge and accept that this Disclaimer, Assumption of Risk and Waiver is intended to be as broad and inclusive as permitted by the laws of the province in which we live and agree that if any portion of this Disclaimer, Assumption of Risk and Waiver is deemed to be invalid, the remainder will continue in full legal force and effect. **ACKNOWLEDGEMENT AND CONSENT:** For both internal and external use, I acknowledge that Kazoku Dojo may compile and use addresses and karate photographs and I consent to such uses and hereby waive all rights to approval and compensation. (Please signify your agreement with the foregoing by signing in the space indicated on the reverse side/page 1 of this form).