



# NEI WAI CHIA MARTIAL ARTS ACADEMY

## YOUTH ACTIVITY RELEASE FORM

I, \_\_\_\_\_ do hereby release NWC Martial Arts Academy LLC, Julie Herbert, Mark Herbert, and any instructor from any liability or judgment due to any injuries or losses sustained by my child (children). Furthermore, I understand that as martial arts is a contact art, even in the most carefully supervised situations, training injuries may happen, and I do hereby give Julie Herbert, Mark Herbert and any of the instructors at Nei Wai Chia Martial Arts, permission to seek emergency medical care for my child (children) in case of accident or injury.

I, \_\_\_\_\_ hereby grant permission to the rights of my child (children)'s image, likeness and sound of their voice as recorded on audio or video without payment or any other consideration. I understand that my child (children)'s image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of my child (children)'s image or recording.

I understand that this waiver is in effect from the date it is signed by me throughout the period of one year, and that it covers classes, clinics, workshops, or any event sanctioned by NWC Martial Arts Academy LLC. Any images or videos taken during this time belong to NWC Martial Arts Academy LLC, and can be published and distributed for marketing purposes indefinitely.

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Parent/Guardian Name (First, Last)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Child Name (First, Last)

\_\_\_\_\_  
Date