

JKMA STUDIO

1911 N PINE ISLAND RD, PLANTATION, FL 33322
WWW.LEARNTKD.COM

TEL.: 754.801.22.88
T7548012288@GMAIL.COM



PARENT'S NIGHT OUT REGISTRATION FORM

1. ESSENTIALS POINTS

BASIC PROGRAM (SUBJECT TO CHANGE ACCORDING TO HOLIDAYS) START AT 6PM ON FRIDAY AND INCLUDE:

- ACTIVE GAMES THROUGHOUT THE STUDIO WITH ACCESS TO ALL EXERCISE EQUIPMENT,
- BOARD AND INTELLECTUAL GAMES, PUZZLES, ETC.
- DINNER (PIZZA + DRINKS + FRUITS)
- MOVIE AND/OR ENTERTAINMENT PROGRAMS ON THE LARGE SCREEN.

PARENTS OR GUARDIAN MUST COME INTO THE STUDIO TO SIGN-IN AND SIGN-OUT THEIR CHILD (-REN).

PRE-REGISTRATION FINISHES UP TO 24 HOURS PRIOR TO THE PROGRAM (BY 6 P.M. ON THE PREVIOUS THURSDAY).

2. CONTACT INFORMATION

CHILD	
CHILD'S FIRST AND LAST NAME*	
DATE OF BIRTH MM/DD/YYYY, AGE	
HOME ADDRESS, INCLUDING ZIP CODE*	
CELL PHONE NO. (IF AVAILABLE)	
PARENTS/GUARDIAN	
FIRST AND LAST NAME*	
CELL PHONE NO.*	
EMAIL	
RELATION TO THE CHILD (-REN)	
CELL PHONE NO.*	
EMERGENCY	
CONTACT NAME	
RELATIONSHIP	
CELL PHONE NO.	
EMAIL	
CONFIRMATION PASSWORD	
ADDITIONS	
CHILD'S ALLERGIES/MEDICAL CONDITIONS/OTHER	
HAVE THE PLANS CHANGED OR BEEN CANCELED?	
IN THE CASE OF CANCELLATION LESS THAN 24 HRS PRIOR TO THE PROGRAM, NO REFUNDS WILL BE PROVIDED FOR THE PAID REGISTRATION FEE. HOWEVER, YOU MAY TRANSFER IT TO ANOTHER DATE!	

3. PAYMENT INFORMATION

ELECTRONIC FUNDS – AUTOMATIC PAYMENTS	
I AUTHORIZE JKMA STUDIO TO DEBIT ENTRIES TO MY ACCOUNT AS INDICATED ON: (CIRCLE ONE)	
CHECK CASH VISA MASTERCARD DISCOVER	
CREDIT/DEBIT CARD ACC No.	_____
EXPIRATION DATE	___/___/___ CODE ___ ZIP _____
ACCOUNT HOLDER'S NAME	_____



4. RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN ANY WAY IN THE PARENTS NIGHT OUT PROGRAM INDICATED BELOW AND/OR BEING PERMITTED TO ENTER FOR ANY PURPOSE ANY RESTRICTED AREA (HERE IN DEFINED AS ANY AREA WHERE IN ADMITTANCE TO THE GENERAL PUBLIC IS PROHIBITED), THE PARENT(S) AND/OR LEGAL GUARDIAN(S) OF THE MINOR PARTICIPANT NAMED BELOW AGREE:

1. THE PARENT(S) AND/OR LEGAL GUARDIAN(S) WILL INSTRUCT THE MINOR PARTICIPANTS THAT PRIOR TO PARTICIPATING IN THE BELOW MARTIAL ARTS ACTIVITY OR EVENT, HE OR SHE WOULD INSPECT THE FACILITIES AND EQUIPMENT TO BE USED, AND IF HE OR SHE BELIEVES ANYTHING IS UNSAFE, THE PARTICIPANT SHOULD IMMEDIATELY ADVISE THE OFFICIALS OF SUCH CONDITION AND REFUSE TO PARTICIPATE. I UNDERSTAND AND AGREE THAT, IF AT ANY TIME, I FEEL ANYTHING TO BE UNSAFE; I WILL IMMEDIATELY TAKE ALL PRECAUTIONS TO AVOID THE UNSAFE AREA AND REFUSE TO PARTICIPATE FURTHER.
2. I/WE FULLY UNDERSTANDS AND ACKNOWLEDGE THAT:
 - A. THERE ARE RISKS DANGERS ASSOCIATED WITH PARTICIPATION IN MARTIAL ARTS STUDIOS EVENTS AND ACTIVITIES WHICH COULD RESULT IN BODILY INJURY PARTIAL AND/OR TOTAL DISABILITY, PARALYSIS AND DEATH.
 - B. THE SOCIAL AND ECONOMIC LOSSES AND/OR DAMAGES, WHICH COULD RESULT FROM THESE RISKS AND DANGERS DESCRIBED ABOVE, COULD BE SERVE.
 - C. THESE RISKS AND DANGERS MAY BE CAUSED BY THE ACTION, INACTION OR NEGLIGENCE OF THE PARTICIPANT OR THE ACTION, INACTION OR NEGLIGENCE OF OTHERS, INCLUDING, BUT NOT LIMITED TO, THE RELEASES NAMED BELOW.
 - D. THERE MAY BE OTHER RISKS NOT KNOWN TO US OR ARE NOT REASONABLY FORESEEABLE AT THIS TIME.
3. I/WE ACCEPT AND ASSUME SUCH RISKS AND RESPONSIBILITY FOR THE LOSSES AND/OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS OR DEATH, HOWEVER CAUSED AND WHETHER CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASES NAMED BELOW.
4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE THE MARTIAL ARTS FACILITY USED BY THE PARTICIPANT, INCLUDING ITS OWNERS, MANAGERS, PROMOTERS, LESSEES OF PREMISES USED TO CONDUCT THE MARTIAL ARTS EVENT OR PROGRAM, PREMISES AND EVENT INSPECTORS, UNDERWRITERS, CONSULTANTS, AND OTHERS WHO PROVIDE RECOMMENDATIONS, DIRECTIONS, OR INSTRUCTIONS RELATED TO RISK EVALUATION OR LOSS CONTROL ACTIVITIES REGARDING THE MARTIAL ARTS FACILITY OR EVENTS HELD AT SUCH FACILITY, AND EACH OF THEM, THEIR DIRECTORS, OFFICERS, AGENTS, AND EMPLOYEES, ALL REFERRED TO HEREIN AS THE "RELEASEES"...FROM ANY AND ALL LIABILITY TO THE UNDERSIGNED, MY/OUR PERSONAL REPRESENTATIVES, ASSIGNS, EXECUTORS, HEIRS, AND NEXT OF KIN FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES, OR DAMAGES, INCLUDING CLAIMS OR DEMANDS ARISING FROM ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATED TO THE EVENT(S) ALLEGED TO BE CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.
5. I/WE HEREBY ACKNOWLEDGE THAT THE ACTIVITIES OF THE EVENT(S) COULD BE DANGEROUS AND INVOLVE THE RISK OF INJURY AND/OR PROPERTY DAMAGE. EACH OF THE UNDERSIGNED ALSO EXPRESSLY ACKNOWLEDGES THAT INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLEGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
6. EACH OF UNDERSIGNED FURTHER EXPRESSLY AGREES THAT THE FOREGOING RELEASE, WAIVER, AND INDEMNITY AGREEMENT IS INTENDED TO BE AS BROAD AND INCLUSIVE AS IS PERMITTED BY THE LAW OF THE PROVINCE OR STATE IN WHICH THE EVENTS IS CONDUCTED AND THAT IF ANY PORTION IS HELD INVALID, IT IS AGREED THAT BALANCE SHALL, NOTWITHSTANDING CONTINUE IN FULL LEGAL FORCE AND EFFECT.
7. ON BEHALF OF THE PARTICIPANT AND INDIVIDUALLY, THE UNDERSIGNED PARTNER(S) AND/OR LEGAL GUARDIAN(S) FOR THE MINOR PARTICIPANT EXECUTES THIS WAIVER AND RELEASE. IF, DESPITE THE RELEASE, THE PARTICIPANT MAKES A CLAIM AGAINST ANY OF THE RELEASEES, THE PARENT(S) AND/OR LEGAL GUARDIAN(S) WILL REIMBURSE THE RELEASEE FOR ANY MONEY WHICH THEY HAVE PAID TO THE PARTICIPANT, OR ON HIS BEHALF, AND HOLD THEM HARMLESS.
8. OTHER CONDITIONAL WAIVER: _____

**WE ARE SURE YOU WILL BE PLEASED TO SEE PHOTOS WITH YOUR CHILD.
HOWEVER, WE WANT TO MAKE SURE YOU HAVE NO OBJECTIONS**

I DO / DO NOT (CHOOSE ONE) GIVE IRREVOCABLE AND ABSOLUTE CONSENT FOR MY CHILD'S PHOTO TO BE TAKEN OR PUBLISH DURING THE PARENTS NIGHT OUT PROGRAM.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS ITEMS. UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR, GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

PARENT OR GUARDIAN SIGNATURE