

Registration and Indemnity Agreement Ron Jon Surf School

Student(s) Name(s):			
Date:	E-Mail:		
Mailing Address: Street			
City:	State:	Zip:	
Age(s):			
Emergency Contact: Name_		Phone#:	
		nent and participation in The Ron Jon Surf School read then complete the following Indemnity and	
to attend the RJSS. I hereby relea	activities associated with the RJSS.	ent(s) Name agree to assume all risks incidental to participate. I hereby grant permission for myself or my child s, claims, actions, damages, costs, and/or expense arising fro ties conducted by RJSS.	
in any RJSS activities. I understa	and and acknowledge that surfing a	ble or liable for any injuries or damages resulting from my p nd other water sports and related activities are inherently dar th the presence of any and all sea life that may be in the water	ngerous
and hold harmess, RJSS, School Officers, employees and affiliate losses by anyone, all of the foreg	of Surf, Hurley International LLC (companies for any and all claims for oing to include all expenses and cha	s associated with this agreement. I further expressly agree to (Hurley), Nike, Inc and Ron Jon Licensing, Inc, their directo or injury to persons or damage to property or any other damages including attorney's fees, which may arise out of, or in ged to have arisen out of activity associated with this agreement.	ors, ages or a connection
International LLC and their affili pictures of, televise, or reproduce of Surf, Hurley, and their affiliate	ated, that they shall have the rights, in any manner or through any med es shall have the right to display, use	onsent and approval to the RJSS, School of Surf and Hurley, without obtaining my further approval to photograph, take dia, images of myself, my child, and my legal guardians. RJ ie, sell or license any such pictures or other reproductions for to myself, my child or my legal guardian. YesNo	motion SS, School
	chool of Surf personnel to conduct lease Check One)	any minor Medical First Aid that may be required for my ch	nild or
procedures deemed necessary for		ool of Surf personnel to order and conduct medical or surgic cy situation. I understand that I will be responsible for all Ho One)	
	nd that each participant must be a c	g in any and all strenuous activities associated with any RJS competent swimmer and acknowledge that I am a competent	

I also hereby agree that by signing this form that all parts of the Registration and Indemnity Agreement are valid and binding from the date of signature to any and all future dates in which I participate in any and all activities at the Ron Jon Surf School. I also agree to pay for any and all services in full by the end of the lesson(s).

Student's signature	
*FOR STUDENTS UNDER 18	
I,	as the parent or legal guardian of
(Guardian's Name)	(Student's Name)
give my permission for my child or Ward to participate in	RJSS activities. I do understand the above stated risks associated with my child's
or Ward's participation in surfing related activities with the	e RJSS.
Parent or Legal Guardian_	Date

NOTICE TO THE MINOR'S CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF RON JON SURF SCHOOL OR SCHOOL OF SURF USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE RON JON SURF SCHOOL, SCHOOL OF SURF, THE RON JON SURF SHOP, HURLEY INTERNATIONAL, AND ANY ALL OF THEIR AFFILIATES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE RON JON SURF SCHOOL HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.