



# West Coast Karate

## Release Form



I hereby agree that in consideration of being given the rights and privileges of a student of West Coast Karate , or a student of any affiliated or auxiliary class taught by instructors or assistant instructors from, either on or off the premises of West Coast Karate , whether a paying or non-paying student, I shall hereafter and forever fully release said karate school, its owners, instructors, directors, agents, officers and students from any cause of action, claim or liability for expenses, or damages, including, but not limited to, any claims for personal injuries resulting from or arising out of any act or omission, including negligence, by said karate school, its owners, instructors, assistant instructors, directors, agents, officers and students, which may result from my participation in West Coast Karate training instruction or related activities, to include participation in affiliated or auxiliary classes taught by instructors or assistant instructors from West Coast Karate.

I am fully aware, and expressly understand that the training and instruction involved in the karate lessons, self-defense classes, and karate camp program and the training and instruction I am to receive, will require strenuous exercise; activities and necessitates bodily contact during sparring, falling exercises and at other times. I am fully aware that any and all of the exercises and activities may result unavoidably in bodily injury to me, and possibly in medical cost which will in no part, nor under any circumstances, be recoverable from West Coast Karate, nor from its owners, instructors, assistant instructors, agents, directors, officers or affiliated karate students.

I warrant that I am in generally good health and physical condition and to the best of my knowledge do not suffer from high blood pressure, heart disease or any other latent physical disabilities. If under age 18, a parent or legal guardian has read this and understands it.

I give West Coast Karate permission to use photos and media of my child ( print child's name) \_\_\_\_\_ on social media, inter-dojos emails, and the West Coast Karate website.

Student Name \_\_\_\_\_

Signature or Parent/Guardian (if under 18) \_\_\_\_\_ Date \_\_\_\_\_



# West Coast Karate Application



Student Name \_\_\_\_\_ Age \_\_\_\_\_

Preferred Name \_\_\_\_\_

Parent/Guardian Name (If under 18) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Student Birth Date \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Please list any physical disabilities or major operations we should be aware of

\_\_\_\_\_

List any previous Martial Arts experience. \_\_\_\_\_

\_\_\_\_\_

Where did you hear about us? \_\_\_\_\_

Names of Siblings Attending \_\_\_\_\_

Pricing and Promotions \_\_\_\_\_

Signed up by \_\_\_\_\_