

York Shotokan Karate Club

Membership Application

Name _____ Date of Birth _____

Address _____

Home Phone _____ Cell Phone _____

Email _____

Sex: M F Height _____ Weight _____

Occupation _____

Name and Address of Next of Kin (Parents, spouse, or nearest relative – indicate relationship)

Do you understand that karate is a contact sport which involves strenuous exercise, possible physical violence, and the use of training equipment which may be hazardous? _____

Do you know of any physical, medical, and/or mental condition which might, in any way, limit, impact and/or affect your full participation in such a program? _____ (If yes, describe fully).

Name and phone number of family doctor and/or any practioner who has given you treatment in the past five (5) years:

Have you ever been convicted of a crime involving physical violence or moral turpitude? _____ (If yes, describe fully): _____

Have you had training, instruction or experience in self defense methods or other aspects of the martial arts? _____ (If yes, describe fully the nature and extent of training, the names(s) of your primary instructor(s), ranks or degrees held, etc.) _____

RELEASE

I, _____, acknowledge and understand that participation in study at York Shotokan Mixed Martial Arts may involve strenuous physical activity, including physical contact with other students and/or instructors. With this acknowledgement and understanding, I certify that I suffer from no physical or mental ailment, injury, illness or disease which could be adversely affected by my participation or could adversely affect other students or instructors involved in the karate school.

I understand and agree that neither York Shotokan Mixed Martial Arts, nor its owners, instructors, employees, volunteers or agents (collectively, "York Shotokan") shall be liable to me for any injury to me or my dependent, or injury caused by me or my dependent to others, or physical damage caused by me or my dependent in connection with my/their participation in the karate school, even if the injury or damage is caused by the negligence of York Shotokan.

In consideration of being allowed to participate and receive instruction, I hereby personally assume all risks, both foreseen and unforeseen, in connection with this school. I further acquit, release, and discharge York Shotokan, its successors and assigns from any and all actions, claims, damages, costs, losses, injuries, expenses, compensation, consequential damages, or suits at law or in equity, which may arise from my participation in the karate school.

I release all photo and video rights that may be used for publicity, promotion and/or media release without any form of compensation. I hereby grant permission to the rights of my, or my dependents, image, likeness and sound of my/their voice as recorded on audio or video tape without payment or any other consideration. I understand that my image may be edited, copied, exhibited, published or distributed and waive the right to inspect or approve the finished product wherein my/their likeness appears. I waive any right to royalties or other compensation arising or related to the use of my image or recording. I also understand that this material may be used in diverse educational settings within an unrestricted geographic area. By signing this Release I understand this permission signifies that photographic or video recordings of me may be electronically displayed via the Internet or in the public. There is no time limit on the validity of this Release nor is there any geographical limitation on where these materials may be distributed. This Release applies to all photographic, audio or video recordings collected by or on behalf of York Shotokan. By signing this form I acknowledge that I have completely read and fully understand the above Release and agree to be bound thereby.

This Release also includes my rights, on the part of me or my dependent, to seek indemnity or contribution, or to claim any liability over York Shotokan for all claims of any nature, which could arise from my participation in the karate school. I also agree to indemnify and hold York Shotokan harmless against any claims or causes of action asserted against York Shotokan as a result of claims asserted by me against other persons as a result of my participation in the karate school.

I further state that I am of lawful age and legally competent to sign this Release; that I understand its terms and contractual in nature; and, intending to be legally bound by the terms of this Release. I have signed the Release as my own free act.

Applicant's Name & Signature

Date

NOTE: If applicant is under the age of 18, the parent(s) or legal guardian(s) of the applicant must sign this Release.

Parent and/or Guardian Signature

Date