

SPARRING RULES FOR PARTICIPATION

1. Martial Art training requires safety rules and strict discipline in following them. Sparring is a contact sport. Every reasonable precaution is taken during training, however, accidents and injuries may still occur. I hereby agree to waive all claims against all persons and organizations relating to injuries sustained while engaged in sparring practice/competitions as well as other Martial Art studies.
2. Gear recommended for sparring includes (but is not limited to) W.T.F. approved helmet, mouthpiece, arm pads, chest protector, groin and shin guards.
3. Only light contact (touching) is permitted to protected, legal areas as described by International W.T.F. rules. No contact is permitted without the express consent of the Instructor and usage of above protective gear.
4. Strict and immediate compliance to all rules and commands is required. Failure to comply may result in disqualification, suspension, reduction in rank and/or other disciplinary action as deemed appropriate by Instructor.
5. The Instructor should be informed immediately of any health or safety concerns by participant (or legal guardian). If something hurts, speak up!

WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND PARENTAL CONSENT (WHEN APPLICABLE)

1. I/a minor in my charge (referred to herein as "Participant") understands the nature of TaeKwonDo Activities ("Activity") and acknowledges the Participant's experience and capabilities and believes the Participant is qualified to participate in such Activity.
2. The Participant fully understands that: a.) TaeKwonDo Activities involve risks and dangers of bodily injury ("Risks"); b.) These Risks may be caused by his/her own action or inaction, the action/inaction of others participating in the Activity, the condition in which the Activity takes place, or the negligence of the "Releasees" named below; c.) There may be other risks, social and/or economic losses either not known to him/her or not readily foreseeable at this time, and the Participant fully accepts and assumes all responsibility for losses, costs and damages incurred as a result of Participant's involvement in the Activity.
3. The Participant hereby releases, discharges, covenants not to sue, and agrees to hold harmless the World TaeKwonDo Federation, its Instructors, any school and/or facility where the Activity may take place, their respective administrators, directors, agents, officers, volunteers, employees, other participants, and, if applicable, the owners and lessors of premises on which the Activity takes place (each considered one of the "Releasees" herein), from all liability, claims, demands, losses or damages alleged to be caused in whole or in part by the negligence of the Releasees or otherwise. The Participant further agrees that, if, in spite of this release, he/she, or anyone on the Participant's behalf makes a claim against any of the Releasees named above, he/she will indemnify, save and hold harmless each of the "Releasees" from any litigation expenses, attorney fees, loss liability, damage or cost any may incur as the result of any such claim.

I HAVE READ THIS AGREEMENT and the RULES FOR PARTICIPATION and FULLY UNDERSTAND ITS TERMS. I have signed it freely and without inducement, and understand that in doing so I have forfeited substantial rights. I understand it is intended to be a complete and unconditional release of all liability to the greatest extent allowable by law, and agree that if any portion of this agreement is held to be invalid, that the balance, notwithstanding, shall continue in full force and effect.

Name of Minor Child (If applicable)
(PLEASE PRINT)

Signature of Parent/Legal Guardian

Date

Name of Participant (PLEASE PRINT)

Signature of Participant

Date

Witness (PLEASE PRINT)

Signature of Witness

Date

BOTH SIDES to be filled out completely. PLEASE PRINT!

Club Location: _____ **Date:** _____

Participant's Name: _____ Date of Birth: _____ Age: _____

Participant's Address: _____

Home Phone: _____ Work Phone: _____

Occupation: _____

MEDICAL CONDITIONS: _____

Parent / Guardian's Name: _____

Occupation: _____

What are your motivations for martial art studies? _____

How did you hear about this class? _____

Comments: _____
