

Waiver and Release of Liability

I recognize and understand that the martial arts training for which I am enrolling is a physical contact activity and that my participation might result in serious injury, including permanent disability or death, and severe social and economic loss. I also recognize and understand that such risk may be due to not only my own actions but also the action, inaction, or negligence of others or the conditions of the premises and any equipment used. I understand that the Amerson's Taekwondo and Fitness, LLC and its instructors will use their significant experience and expertise to minimize any such risk but that such risk cannot be completely foreseen or eliminated without fundamentally impairing the training.

I warrant that I am in good health and have no existing injury or physical limitation that would put me at increased risk for injury or prevent me from participating fully and safely in such activities.

I acknowledge that my use of techniques taught in this training may not be effective in all self-defense situations and that no warranty as to effectiveness of the techniques for a particular situation is made by Amerson's Takewondo and Fitness, LLC.

In addition, I acknowledge that video, photographs, or other recordings may occur during this classes and training at Amerson's Taekwondo and Fitness, LLC facilities. I waive and release any and all rights or claims to the use of my image or likeness that may be obtained in the course of such recordings.

I hereby release Amerson's Taekwondo and Fitness LLC, its owners, agents, instructors, personnel, it's lessor, IGWT Properties LLC, and, if applicable, other owners of the premises from any liability associated with the performance of martial arts techniques or physical activities that are part of and occur during this martial arts training or the practice of such techniques learned during the training and applied later.

I HAVE READ THE ABOVE WARNING AND RELEASE AND UNDERSTAND ITS CONTENTS. I UNDERSTAND THAT BY SIGNING BELOW, I AM WAIVING CERTAIN RIGHTS AND DO SO IN CONSIDERATION OF THE OPPORTUNITY TO PARTICIPATE IN THIS MARTIAL ARTS TRAINING.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Signature: _____ Date: _____

(For minors under the age of 18, a parent or legal guardian must sign.)