Date:
Child's Name :
I do undersigned, do hereby voluntarily submit for participation in a birthday party at The Karate Center (TKC) under the leadership of the TKC staff and hereby assume full responsibility for any and all damages, injuries, or losses that I may sustain or incur, if any while attending or participating. I waive all claims against owners, operators, and instructors, of TKC individually or otherwise, for any claims or injuries that I may sustain. I further understand that I am entering the Martial Arts School at my own risk and that any medical treatment given to me will be the first aid treatment only. I declare that I am free of any physical defector illness, which might prohibit participation. I further agree to abide by the rules of The Karate Center. I certify that the above information is correct and accurate to the best of my knowledge. The staff of The Karate Center reserves the right to refuse entry to anyone.
Parent/ Guardian Signature:
Parent Contact Info:
Home Phone
Cell Phone
E-mail: