

Participation Waivers:

Student Name: _____ Date of Birth: _____ Today's
Date: _____

Parent (Guardian Names): _____ Home Phone:

Address: _____ City: _____ State:
_____ Zip: _____

Email: _____

Trial Class Waiver:

I do hereby release Mid-America Karate, Inc., Karate Kids World, Rick Bailey, Cole Bailey and all other instructors or students in any capacity for any liability due to injuries, etc. that I/my child may obtain as a result of my attendance or participation in any and all martial arts classes at Mid-America Karate, Inc. and Karate Kids World, any special martial arts event associated with this class, or in the case of injury as a result of falling on the stairs (where stairs may exist). I clearly understand that participation in this class could involve bodily contact, break falling, and/or body rolls. I am also aware that some of the training areas of some studio locations require access by stairway and that I/my child am/is fully capable of safely walking up and down a flight of stairs. I am fully aware of my/my child's personal medical condition and hereby certify that I/my child am/is mentally and physically fit to participate in the classes for which I have registered and that I have the medical coverage or personal means to cover the expenses related to any injury that I/my child might receive as a result of participation.

Participant's Signature:

(Parent's or Guardian's Signature if student is under 18 years of age)