

BOSCOBEL FAMILY MARTIAL ARTS & WELLNESS CENTER, LLC

Invitational Tournament November 12th, 2022

Participant: _____ Age _____ Rank _____

Email: _____ Phone: _____

Forms _____ Sparring _____ Weapons _____ Breaking _____ Team Forms _____

School Name: _____ Instructor _____

Competition fee: \$55 (1 or all Events)

Spectator fee: \$5

LIABILITY WAIVER: All participants must sign this release. Parent/Guardian must sign for minors. I the undersigned do hereby agree to allow the above named Person(s) to participate in open gym. I am aware of and understand that there may be potential risks inherent with participating in any recreation activity and that Boscobel Family Martial Arts & Wellness Center does not provide accident insurance. I assume all risks and hazards incidental to such participation including transportation to and from the activities and do thereby waive, release, absolve, indemnify and agree to hold harmless Boscobel Family Martial Arts & Wellness Center instructors, staff, and other persons for all claims, injuries, damages or right of action directly or indirectly arising out of use of Boscobel Family Martial Arts & Wellness Center facilities, equipment, and/or participation in Boscobel Family Martial Arts & Wellness Center activities. In event of an emergency, I authorize Boscobel Family Martial Arts & Wellness Center to obtain treatment for my Son/Daughter or myself.

PHOTO RELEASE: I authorize the publication and/or display of any analog or digital media content, including but not limited to photographs and video, taken of myself/child to be used by Boscobel Family Martial Arts & Wellness Center.

Signature:

_____ Date: _____

Parent or Guardian:

_____ Date: _____