

Registration and Release Form

Texas Kobukan LLC

www.texaskobukan.com

**223 S CEDAR RIDGE DR
DUNCANVILLE, TX 75116
214-773-0221**

Ages 7 to Adult. For consideration of younger students, parents should discuss their situation with the karate instructors during on-site registration, via the phone number shown above, or send an email to info@texaskobukan.com.

To register for classes, fill out both sides of this form.

One form per family

Student's Name(s)		
Age(s)	Birth date(s)	
Street	City	Zip
Parents' Names		
Home Phone	Work Phone	Cell Phone
Email:		
List any health or physical conditions which might limit your class participation		
Please list previous training in the martial arts		

Please read and sign the **WAIVER AND RELEASE OF CLAIMS on the reverse side** of this registration form. Any activity has the potential to cause injuries ranging from sore muscles to more serious tears of soft tissues, or even fractures or cuts. Texas Kobukan takes great care to ensure that no one becomes injured. You can help protect yourself or child, as students, from possible injury by practicing the following precautions (please discuss with your children):

1. Practice exercises correctly, as taught.
2. Never touch or lean against the mirrors, windows, or doors.
3. No running, hanging or climbing on equipment, improper conduct, etc.
4. Children must wait inside after class; parents should come inside and get them.
5. Children should be dropped off and picked up within 15 minutes of class start / end time.

Identify the number of students and circle the monthly dues for each.				
Monthly Tuition (up to three classes per week) per Student (same family / single payment)				
1st	2nd	3rd	4th	5th+
\$80	\$70	\$60	\$50	\$40

<p>To register by mail, send this form with your TOTAL payment (payable to Texas Kobukan LLC) to:</p> <p>TEXAS KOBUKAN 223 S CEDAR RIDGE DR DUNCANVILLE, TX 75116</p>	<p style="text-align: right;">Write Total <u>Monthly</u> Tuition amount here: _____</p> <p style="text-align: right;">Add <u>Annual</u> Registration Fee of \$40 <u>1st student</u>: _____</p> <p style="text-align: right;">Add <u>Annual</u> Registration Fee of \$25 <u>each additional student</u>: _____ (same family)</p> <p style="text-align: right;">Gi (karate uniform) \$30 each: _____</p> <p style="text-align: right;">TOTAL: \$ _____</p>
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Date _____ Signature _____

WAIVER AND RELEASE OF CLAIMS

Name of Participant (please print): _____

Date: _____

PLEASE READ THIS CAREFULLY! By signing this Waiver and Release of Claims (the “Release”) and participating in karate classes offered by TEXAS KOBUKAN, you will be waiving and releasing any and all claims you may have against the sponsors of these karate classes (Texas Kobukan and its officers, directors, owners, partners, teachers, agents, employees, contract associates, and others acting with or on behalf of Texas Kobukan, which will collectively be referred to in this Release as “Texas Kobukan”), that may arise out of your participation in the karate class or other activities at Texas Kobukan, and agree as follows:

I, as the [participant / parent or guardian of the participant] recognize, acknowledge and agree that the karate classes offered by Texas Kobukan are an athletic activity that can and does involve strenuous physical activity, exercise, and bodily contact, and as such, involves a substantial risk of injury. I agree to assume the full risk of any injuries, including but not limited to death, disability, or any other injuries or losses, both economic and non-economic, which may be sustained as a result of participating, in any manner, in any and all activities connected or associated with Texas Kobukan. As a condition to Participant’s participation in these activities, I hereby agree to waive and release any and all claims that Participant and any and all persons entitled to make derivative claims based on any injuries to Participant may have against Texas Kobukan (as defined above) and all other persons or entities connected or associated in any way with Texas Kobukan, arising in any way out of any participation in such activities. This waiver and release expressly includes but is not limited to any claims Participant may have arising out of any negligence other than gross negligence on the part of Texas Kobukan.

By signing this Release, I acknowledge and represent that I have read and fully understood the Release. I further acknowledge and represent that the risks involved in participating in karate classes, exercises, physical training, and other activities have been fully disclosed to me and explained to my satisfaction. I further acknowledge and agree that any other warnings and/or advise ments that I may subsequently receive will be incorporated by reference into and become a part of this Release, unless I advise Texas Kobukan in writing in advance of any participation in further activities following such subsequent warning and/or advisement.

The discipline of karate is a discipline of self-defense. I specifically acknowledge and agree that Participant will use the information and skills gained by participation in these karate classes solely for defensive purposes, and will attempt to minimize any physical contact in any real-life situation. I further acknowledge and agree that Participant will participate in all activities sponsored by Texas Kobukan with appropriate respect for the safety and enjoyment of all the fellow participants.

Signature of Participant

Signature of Parent or Guardian

IN CASE OF EMERGENCY	
NAME OF PERSON TO CONTACT	
_____ (PRINT)	
PHONE NUMBER (_____) _____	ALTERNATE NUMBER (_____) _____