

YOBUKAN REGISTRATION FORM

Location Attending: Bon Accord \_\_\_\_\_ Gibbons \_\_\_\_\_ Redwater \_\_\_\_\_

If Gibbons **ONLY** - Class Enrolled in:

4-6 year old \_\_\_\_\_ Beginner (White to Yellow) \_\_\_\_\_ Advanced (Orange +) \_\_\_\_\_

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

Parent / Guardian Name (if applicable): \_\_\_\_\_

Emergency Contact(s): \_\_\_\_\_

Allergies / Medical Information: \_\_\_\_\_

AHC #: \_\_\_\_\_ DOB: \_\_\_\_\_

Liability and Personal Information Waiver:

I, \_\_\_\_\_, have informed myself of any and all risks that could take place due to my participation or my child's participation with the program and hereby release YOBUKAN KARATE, its employees, instructors, agents and volunteers from any claim for loss, injury or damage to person or property either directly or indirectly, from the attendance, including participation in any activity scheduled or unscheduled, including travel to and from any location for myself or my children. I acknowledge having read and understood this release and accept the terms therein.

Signature of Adult Participant (Over 18 years): \_\_\_\_\_

Signature of Parent / Guardian (if applicable): \_\_\_\_\_

Date: \_\_\_\_\_

Payment Received (Cheque #): \_\_\_\_\_