

ASH'S OKINAWAN KARATE

610 Professional Drive

Suite 1

Bozeman, MT 59718

(406) 994-9194

RELEASE FORM

NAME: _____

PHONE: (Home) _____

ADDRESS: _____

(Work) _____

I request to voluntarily participate in any or all activities offered by ASH'S OKINAWAN KARATE. In doing so, I hereby state and acknowledge the following:

- 1.) I understand and appreciate the risk of activities in which I desire to participate and do acknowledge the risk of personal and/or property injury.
- 2.) Even with such understanding and appreciation of the risk, I still desire to participate or have my minor children participate, and I do hereby fully and irrevocably release and forever discharge ASH'S OKINAWAN KARATE, its instructors and members, and lessees of the property from any and all legal claims, demands, actions, losses, and/or legal liability of any kind of nature or description resulting from such activities sustained by me or my minor children, and further, hold all said parties harmless.
- 3.) I do hereby personally assume all risks which may be associated with such activity. I have read and fully understand this release and waiver form.

Date

Signature of student (or parent if student under 18)

Print Name

Print child's name, if applicable