



Elite Defense Tactics
Training For Life

STUDENT WAIVER

Student Name _____ D.O.B. _____

Address _____

City _____ State/Zip _____

Student Cell Phone _____ Student Email Address _____

Home Phone _____ Work Phone _____

If Minor:

Mom's Name _____ Home Phone _____ Cell Phone _____

Mom's Work Phone _____ Mom's Email Address _____

Dad's Name _____ Home Phone _____ Cell Phone _____

Dad's Work Phone _____ Dad's Email Address _____

Emergency Contact (Name) _____ Relation _____ Phone # _____

How did you hear about us? _____

List Any Health Conditions and/or Allergies for Instructors to be aware of: _____

PLEASE NOTE:

We email all important information and plan to post it on our website. In the event that info needs to be sent out quickly (i.e. weather cancelation) we will also send out a mass text message. Please list the phone number or numbers you would like to have the text sent to.

Name: _____ Phone # _____

By signing below, you are agreeing that EDT may use photos or images of Student on Facebook, Twitter, website or various advertisements.

AUTHORIZED SIGNATURE (Custodial Parent/Legal Guardian) X _____

WAIVER & RELEASE OF LIABILITY

You agree that you are aware that Student/Participant ("Student") is engaging in activities and the use of equipment, training and instruction that can be dangerous to the participant and could cause injury or death to Student. Student is voluntarily participating in these activities and Student assumes all risks of injury to Student, which may result. Student, parent or guardian hereby waives and releases and forever discharges any claim at law and at equity or right to sue Elite Defense Tactics, LLC ("EDT" or "School"), EMAA Studio LLC, Championship Martial Arts, their owners, instructors, administrators, staff, employees, heirs, successors, or landlord, for any damage, loss, injury, suffering, or death to Student, which may result, known or unknown, which may be sustained by student in connection with and in course of receiving training and techniques from the instructor or instructor's staff, officials or employees either in the studio or at any remote site that School may use. Student, parent or guardian has carefully read this waiver and release and fully understands it is a release of all liability and damage and hereby waives his/her rights to the claims, actions, cause of actions, demand or suit for loss, injury, damage, or suffering sustained as a result of anything other than gross negligence on part of this school. The School will make no evaluation or recommendation whether participant is sufficiently physically fit for any activities.

LOSS/DAMAGE/THEFT OF STUDENT'S PROPERTY: The School does not assume any responsibility for the loss, damage or theft of any property belonging to the Student. Student agrees that the School and its personnel are not responsible for, or liable for, any such property even if its loss, damage, or theft occurs on or about the School's facility.

AUTHORIZED SIGNATURE (Student or Custodial Parent/Legal Guardian)

X _____

Date _____