

Master Reilly's Family Martial Arts, LLC Nunchuck Camp 2021 Registration Form
June 28th - July 2nd Tuesday - Saturday 9:30AM-Noon

Name: _____

Address: _____

Age: _____ T-Shirt Size: _____ Color Preference: Red Blue Silver Gold
(Foam In Blue and Red only)

Please list any food allergies or prominent medical information below:

Emergency Contact: _____

Phone Number: _____

Name of person picking up your child if other than the parent: _____

By signing below you agree to the terms and conditions laid out in Master Reilly's Family Martial Arts, LLC Waiver and Liability Release Form.

Signature (Parent or Guardian if under 18): _____

Price: \$60 per student. Includes 5 days of awesome Lessons, Snacks, Games, T-Shirt!
Payment and form due June 1st. No exceptions. You do not need to be a current student to participate, however you are expected to follow all guidelines found within our rules and ettiequite form. Students must be at least potty trained to participate. Foam nunchucks will be ordered for younger and beginner students who Master Reilly considers necessary for their safety. Family discounts do apply!

In consideration of being allowed to participate in classes or activities at Master Reilly's Family Martial Art, LLC and or Next Step Therapy (including related events and activities), the parent/guardian or adult practitioner signing this form acknowledges, appreciates and agrees that the risk of injury from the activities of these programs can be significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline may reduce the risk, the risk of serious injury does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe an unusual or significant hazard during my child's presence or participation, I will remove my child from participation and bring such to the attention of the nearest instructor immediately; and, I, for myself and my heirs, assigns, guardians, personal representatives and next of kin, hereby releases and hold harmless Master Reilly's Family Martial Art, LLC, and Next Step Therapy, instructors, employees, and other participants, sponsoring agencies, booster club, and advertisers ("Releases"), with respect to all and any injury, disability, death, or loss or damage to person or property, whether arising from the negligence of the releases or otherwise, to the fullest extent permitted by law. The individual recognizes that regular attendance is important for individual progress and understands that it is the individual's responsibility to attend the classes. The individual understands that during the course of instruction, independent contractors and instructors of the school and/or other authorized personnel will be engaged in a course conducting physical contact, of which he/she gives full consent to such contact as required by activities I UNDERSTAND and AGREE that Master Reilly's Family Martial Arts, LLC, and Next Step Therapy will not be held liable for any injuries, damages or losses NOT caused by or resulting from negligence of the owner(s), operators, or person(s) in charge of the establishment, or their agents, assistants and/or employees. Because of the physical demand of the class instruction, the individual understands he/she must be in good physical condition to participate in the said course, instructions and exercises. To that end, the individual acknowledges he/she is in good health and not suffering from any ailments that would adversely affect that individual, instructor, or third parties. Any health concerns must be made known to the staff prior to joining in any activity. All above information, along with what I have provided above is true and accurate to the best of my knowledge for me or for whom I am guardian over. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. By my signature I certify that I, as parent/legal guardian for the designated participant, or I myself, do consent and agree to my/his/her release.

Signature

Date