



# Goju-Ryu Karate

## INFORMED CONSENT FORM

In consideration of being permitted to participate in karate classes at the Berwyn Heights Town Center, I, for myself, my heirs, personal representative(s) and assigns hereby represent and agree as follows:

1. I fully recognize and understand that there are risks and hazards, minor and serious, associated with participation in Goju-Ryu Karate which include, but are not limited to: strains, bruises, scratches, scrapes, broken noses, hypothermia exposure, sprains, head injuries, dislocations, spinal cord, injuries paralysis; and which may also include other serious bodily injuries and, even, death.
2. Knowing the dangers, hazards and risks associated with Goju-Ryu Karate, I voluntarily assume all responsibility and risk of loss, damage, illness and/or injury to my person or property in any way associated with my participation in such activities.
3. I understand that protective equipment including, but not limited to, mouth piece, shin and forearm pads, head gear and gloves is recommended for the safety and protection of participants in Goju-Ryu Karate, and I agree to wear such equipment when participating in such activities. However, I understand that wearing such equipment will not eliminate the risks of participation.
4. I understand that the rules and regulations applicable to the Sho-Rei-Shobu-Kan Budo Association are designed, in part, for the safety and protection of participants and I agree to abide by those rules and regulations. I acknowledge that I have received a copy of those rules and regulations and have read and understand them.
5. I understand that Goju-Ryu Karate requires a minimum level of fitness for safe participation. I also understand that participants in these activities are advised to have a physical examination to determine their fitness for participation. I further understand that the Goju-Ryu Karate does not provide medical, health or other insurance for participants in activities.
6. To the fullest extent permitted by law, I hereby release and forever discharge, and agree to indemnify and hold harmless, the instructors, the other participants, Sho-Rei-Shobu-Kan, and the Town of Berwyn Heights and their officers, agents, employees, and volunteers from and against any and all liabilities, claims, demands and causes of action on account of any loss or injury in any way arising out of or relating to my participation in or involvement with karate or use of equipment and facilities, including travel thereto and therefrom, whether due to the negligence, default or other action or inaction of any person or entity. This specifically includes any negligence, default or action or inaction by Sho-Rei-Shobu-Kan and/or the Town of Berwyn Heights and its officers, agents, employees and volunteers.

I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND THAT I HAVE READ AND FULLY UNDERSTAND THIS RELEASE AND INFORMED CONSENT FORM AND I SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

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Printed Name of Participant

\_\_\_\_\_  
Date

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Signature of Participant

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e-mail

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Signature of Parent/Guardian if Participant  
is under 18 years old

\_\_\_\_\_  
Phone