

Authorization to Attend and Participate in Free, Introductory, Birthday Party, or First Classes

Student Name (Printed): _____ Age: _____

Parent Name (Printed): _____ Phone: _____

Email Address _____

Student (Over Age 18) or Parent or Guardian Signature: _____

Medical Authorization

In the event I require immediate medical attention, I hereby authorize River Valley Defensive Arts LLC, its' instructors, or assistants, to summon medical assistance, and to administer such emergency assistance/treatment as is necessary under the circumstances and will not hold River Valley Defensive Arts LLC, its' employees, instructorsFree/Introductory/Birthday/First Classes, or assistants, liable for the same. I understand and agree that it is my obligation to inform River Valley Defensive Arts LLC, its' employees, instructors, or assistants, of any special medical or physical needs, concerns, or conditions in a timely manner and hold River Valley Defensive Arts LLC, its' instructors, or assistants, harmless for any injuries incurred as a result of my failure to provide timely notification.

Release of Liability

I am fully aware of the possibility that I may suffer bodily injury during or as a result of attending or participating in any martial arts or self defense classes, or other physical fitness activities. I hereby, for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may now or in the future have against River Valley Defensive Arts LLC, its employees, and directors, instructors, assistants, heirs, executors, administrators, assigns or legal representatives; and or against other independent or individual members or participants of these classes.

Signed this _____ day of _____, 2020.

Student Name (Printed) _____

Student Signature _____

On behalf of my minor son or daughter I hereby agree to the above Medical Authorization and Release of Liability.

Signed, this _____ day of _____, 2020.

Parent or Guardian (if applicable) Name Printed:

Parent or Guardian (if applicable) Signature:
