



SOAR TANG SOO DO

~~ soartsd.com ~~

Warning, Waiver, Release of Liability, Assumption of Risk and Agreement to Participate



THIS AGREEMENT MUST BE SIGNED BY ANY INDIVIDUAL WHO WISHES TO PARTICIPATE IN
SOAR TANG SOO DO SANCTIONED ACTIVITY.

In consideration of being allowed to participate in any sanctioned events of *Soar Tang Soo Do*, I, ...

Student Name: _____

Phone: _____ Email: _____ Parent's email if a minor

Address: _____

... recognize and understand that martial arts training is a physical contact activity and that my participation may result in risk of personal injury or harm, to include but not limited to, bodily injury due to failure to follow instructions contained in a safety brief, posted signs, and verbal instructions, as well as minor or major injuries associated with dehydration, falls, slips, trips, bodily injury caused by other participants, or other similar injuries, including permanent disability or death, and severe social and economic loss. INITIAL

1. ... recognize and understand that such risk may be due to not only my own actions, but also the actions, inaction, or negligence of others, the regulations of participation, the conditions of the premises, or any of the equipment used. INITIAL
2. ... recognize that there may be other risks that are not known to me or to others or not reasonably foreseeable at this time. INITIAL
3. ... agree to inspect the facilities, equipment, and pairings before participation. I will immediately inform an instructor if I believe that anything is unsafe or beyond my capability and refuse to participate. INITIAL
4. ... assume all of the foregoing risks and accept personal responsibility for any damages that may result from injury, permanent disability, or death. INITIAL
5. ... enter martial arts training and/or competition entirely of my own free will and understand the importance of following the rules of training and competition. I will be provided a digital copy of the student manual for *The World Tang Soo Do Association* and agree to abide by the tenets and codes given therein. INITIAL
6. ... certify that I am in good physical condition and have no disease, injury, or other condition that would impair my performance or physical and mental well-being during intense training practice and/or competition. INITIAL
7. ... grant permission in case of injury to have a doctor, nurse, athletic trainer, or other emergency medical personnel provide me with medical assistance or treatment for such injury. INITIAL
8. ... release, waive, discharge and covenant not to sue, *Soar Tang Soo Do*, its affiliated organizations and governing bodies, their officers, instructors and personnel, other members of the organizations, participants, supervisors, coaches, sponsoring organizations or their agents, and if applicable, owners and leasers of the premises from any and all liability to the undersigned, his or her heirs and next of kin for any and all claims, demands, losses and damages which may be sustained and suffered on account of injury, including death, or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasors or otherwise. INITIAL

I HAVE READ THE ABOVE WARNING, WAIVER, RELEASE, AND AGREEMENT TO PARTICIPATE.
I UNDERSTAND ITS CONTENTS AND DO HEREBY SIGN IT VOLUNTARILY.

Printed Name
(parent or guardian if under 18)

Signature

Date



SOAR TANG SOO DO



Risk Agreement

ADVISORY OF RIGHTS AND RESPONSIBILITIES INITIAL

Safety is not the sole responsibility of instructors and staff. Everyone in class is responsible for their own safety and the safety of those around them.

All students have the right and responsibility to excuse themselves from any exercise they believe will be harmful to them. All students must evaluate each situation in the context of their skill and current physical condition, and conduct each drill in a safe manner. If an instructor gives an instruction that is unsafe for the student, it is the student's responsibility to inform the instructor that the activity may be unsafe. The instructor will routinely excuse the student from unsafe exercises and drills. The instructor may ask for an explanation, and the student is expected to provide one.

All students have the responsibility to train and conduct themselves in a manner that helps all students and instructors remain safe. Students must give those who are training enough room to avoid interfering and avoid being accidentally struck by someone else practicing, which is especially important when others are practicing with weapons.

In the event of an injury, students have the right and responsibility to evaluate the extent of harm, stop what they are doing, even if it includes a partner, and determine if it is safe to continue. Unless a student is certain that further practice will not create or worsen a problem, all students are encouraged to stop what they are doing and inform the instructor. In the event of a serious injury or the appearance of a serious injury, all students, instructors, staff, and visitors, notably parents, have the right to call a stop to a particular training exercise.

If a student notes an unsafe training situation, which may include a student performing a skill incorrectly, a student not showing due regard for the safety of others, a defective piece of training equipment, a potentially dangerous obstacle or condition on the floor, or anything else that may cause or lead to harm of the students, instructors, visitors or guests, then the student is expected to correct the situation if it is within his ability or to notify an instructor or staff member immediately. If something is simple to correct, such as removing an obstacle from the floor, the student should correct the situation. If the situation may require the authority of the instructor or staff, or if it is not a simple matter, then the instructor or staff member should be notified immediately.

ASSUMPTION OF RESPONSIBILITIES AND RISK INITIAL

Martial Arts training is a potentially dangerous activity. Bumps, bruises, scrapes, scratches, and soreness are commonplace, and most students will encounter this sort of minor injury from time to time in their training. More serious injuries are possible, including sprains, strains, twists, cramps, and injuries of similar magnitude, and the student can be expected to encounter these injuries frequently. The possibility of more serious injuries exists, including fractured bones, broken bones, torn ligaments, though not all students encounter such serious injuries. There remains, despite safety precautions, the remote possibility of crippling or death, though this is certainly not expected in this martial arts class.

I understand the above statement of risk, and I understand the rights and responsibilities of students. I assume responsibility for my own safety (or the safety of my child), understanding and accepting the risks involved with martial arts training. Even if the instructor has informed me that no serious injuries have ever happened in this school or with any of the instructors, I understand that this does not mean that there is no possibility of harm. By assuming this risk, I completely absolve all instructors, staff, guests, students, landlords, management companies, and any and all other parties of liability for my harm, unless intentionally caused in criminal conduct.

NOTICE AND CONSENT TO INSTRUCTION INITIAL

This school seeks to make use of highly trained professional instructors with both expertise and experience in the martial art that we teach. The head instructor or any other qualified instructor may teach classes. Should an instructor be unavailable for a given class, a junior instructor, senior student, or guest instructor may teach. The choice of the instructor is left to the discretion of the school.

I understand that I may not always have the instructor I desire, but I shall seek to learn from whoever is teaching, to show the respect due to the position of teacher to whomever is teaching, and to conduct myself in accordance with the etiquette established at this school. I understand that I have the responsibility for my own safety, no matter who may be teaching the class. I specifically consent to the instruction by Soar Tang Soo Do and the World Tang Soo Do Association, its instructors, and/or staff. I specifically understand and agree that the full force of this document applies no matter who is teaching.

NOTICE OF PHYSICAL CONTACT INITIAL

Complete martial arts training involves a wide variety of skills. While practicing these skills, students may have contact with any portion of the body. The groin may be the target of kicks, strikes, or grabs. The chest, buttocks,

groin, or any part of the body may be contacted by any part of the training partner's body during training with martial arts techniques or incidentally contacted while performing a martial arts technique that targets another portion of the body. Simulated strikes and grabs are to be used as often as possible. When male and female students train together, or when adult and minor students train together, and in any other training combination, the purpose and intent of the school, instructors, and staff are to provide an environment for all students to learn and practice martial arts and self-defense. Students are expected to conduct themselves appropriately at all times to ensure the best training results for everyone.

Should any student feel that a training partner is engaging in contact beyond the scope of training, or a training partner is taking undue and unacceptable advantage of training contact, or if a student is made uncomfortable by any training exercises or the partner, then that student has the right to withdraw from the exercise or drill. If the contact of a training partner appears inappropriate, the student should inform the instructor privately. If the conduct of the training partner or any training partner appears criminal, then the instructor should be informed immediately, and the authorities may be notified either by the student, the instructor, and/or the parent, as applicable.

CONSENT TO PHYSICAL CONTACT INITIAL

I understand the nature of physical contact in martial arts training, and I understand that I have the right to immediately withdraw from any exercise or drill in which the contact of any party seems beyond the scope of training and makes me uncomfortable. I agree to abide by the school etiquette in all manners pertaining to training, and I shall not in any way conduct myself inappropriately or take inappropriate advantage of the contact martial arts training allows.

INDEMNIFICATION BY PARENTS INITIAL

Applicable only to parents enrolling a minor child.

I agree not to bring any claim or suit against the school, instructors, staff, guests, students, landlord, or any other parties on behalf of my child for any injury or harm sustained by any event short of a criminal act, and then only the criminal shall be the subject of such a suit. I further agree that I will not bring, nor encourage, any claim or lawsuit. I also agree not to cooperate in the bringing of such a suit or claim except insofar as I may be legally required to do so. Finally, I shall indemnify the school, instructors, staff, guests, students, and any additional defendants covered by this agreement for all judgments, costs, attorney fees, and other expenses incurred as a result of a breach of this agreement.

ARBITRATION CLAUSE INITIAL

Should any dispute arise between me, my child, or anyone acting on behalf of my child, regarding this school, then I specifically agree that the dispute shall be resolved in binding arbitration. Should a suit be filed in Court, I specifically authorize the Court to order the case to a binding arbitration.

SEVERABILITY INITIAL

If any clause, sentence, phrase, or statement is found unenforceable or invalid by any Court of Law, the remainder of the document shall remain valid and enforceable, and the invalid clause, sentence, phrase, or statement shall be struck from the document.

DURABILITY INITIAL

This document is effective from the date signed with no expiration. Furthermore, the terms of this document are retroactive to the beginning of training and visiting this school if this document is signed after that date.

AUTHORITY TO TREAT INITIAL

I give the instructors, staff, and responsible adults the power to authorize medical or other treatment of the student named, subject to the limitations listed below, if any. If I am not the named student, I am the parent, guardian, or responsible adult for the named student, and I have the legal right to grant this power. Treatment may be made without regard to whether I or any other parent, guardian, or responsible person has been contacted or has consented to the specific treatment, provided it does not conflict with the limitations outlined below. This authority begins on the date signed and continues indefinitely.

By granting my authorization, I assume responsibility for all decisions made, provided they are reasonable under the circumstances and based on the knowledge and understanding of the person making the decisions. I trust their judgment and offer the benefit of the doubt in any claim or legal proceeding. This presumption may only be overcome by clear and convincing evidence that they acted with malice or willful gross negligence, and if so, they may still be liable.

I understand that the instructors, senior students, or others may have some skills in first aid, CPR, and at their discretion, I authorize them to use those skills and techniques to assist in any circumstance in which they judge their skills would be necessary or helpful until care is passed to a higher medical care qualification.

Limitations to treatment: _____

Information or Medical Significance: _____



SOAR TANG SOO DO

(MR. ANDREW E. CALVERT, OWNER)



Legal Action Declaration

Have you been convicted of a felony? Yes No Conviction: _____

Are you a registered sex offender? Yes No Location: _____

Student Details

Name: _____ Preferred Name: _____

Title: Mr. Ms. Mrs. Dr. Rank: _____ Date of Birth: ____/____/____

Occupation: _____ Reason for Joining: _____

Height: _____ Weight: _____ Uniform: _____

Address: _____

Phone: _____ Email: _____

Medical Concerns: _____

Martial Arts Background: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact Phone Number: _____