

AIKIDO ACADEMY- WAIVER AND RELEASE

In return for being allowed to attend or participate in the Aikido Academy class, program or related activities at the Granada Masonic Temple or elsewhere, I am agreeing to the terms and conditions below. I further agree that these terms will be binding on me, my spouse, heirs, personal representatives, children, and any guardian ad litem for said children.

1) I HEREBY AGREE TO ASSUME ANY ALL RISK FOR ANY INJURY, DAMAGE, OR LOSS TO EITHER MYSELF OR TO MY PERSONAL PROPERTY INCURRED WHILE ON THE PREMISES OF THE GRANADA MASONIC CENTER. THE AIKIDO ACADEMY, ITS INSTRUCTORS AND GUEST INSTRUCTORS, THE GRANADA MASONIC TEMPLE ASSOCIATION, AND ANY FELLOW PARTICIPANTS SHALL NOT BE LIABLE, AND I HEREBY EXPRESSLY WAIVE ANY CLAIMS AGAINST THE AIKIDO ACADEMY, ITS INSTRUCTORS AND GUEST INSTRUCTORS, THE GRANADA MASONIC TEMPLE ASSOCIATION, AND ANY FELLOW PARTICIPANTS FOR ANY INJURY, DAMAGE OR LOSS TO EITHER MYSELF OR MY PERSONAL PROPERTY INCURRED WHILE ON THE PREMISES OF THE GRANADA MASONIC CENTER. This is intended to be a complete release of any responsibility for personal injury or property loss or damage incurred on the Granada Masonic Center premises whether it occurs during aikido training or not.

2) I FURTHER HEREBY AGREE TO WAIVE ALL CLAIMS AND RELEASE THE AIKIDO ACADEMY, ITS INSTRUCTORS AND GUEST INSTRUCTORS, AND ANY FELLOW PARTICIPANTS FROM ANY AND ALL LIABILITY FOR ANY INJURY, DAMAGE, OR LOSS TO EITHER MYSELF OR TO MY PERSONAL PROPERTY INCURRED DURING THE COURSE OF INSTRUCTION, TRAINING OR RELATED AIKIDO ACTIVITIES REGARDLESS OF WHERE SUCH ACTIVITIES ARE HELD. I understand that the intent of this waiver and release agreement is to completely waive and release any and all claims of liability by me against the Aikido Academy, its instructors, guest instructors and fellow participants for any injury, damage or loss to myself or my personal property to the fullest extent as allowed under California law.

3) I understand and agree that it is my responsibility to practice aikido safety and responsibly, and that the instructor, or anyone authorized to act in his stead, will have the right to discipline or expel me from this activity, at his discretion, for disobeying instructors or dojo regulations, for any disrespectful behavior, or for any reason, including but not limited to conduct deemed detrimental to spirit of training at the Aikido Academy.

4) I agree to pay all applicable training fees. I understand that fees paid are not refundable in the event of termination or disciplinary action deemed necessary and appropriate by the instructor.

5) I further agree to recognize and uphold the regulations, rules, and standards of conduct and etiquette established by the Aikido Academy and its instructors.

I have read and understood the foregoing terms and conditions of the Aikido Academy Waiver and Release, and I freely and voluntarily agree to these terms and conditions.

Print Applicant's Full Name

Date

Signature

Signature of Parent or Guardian if Applicant is a Minor:

I warrant that I am the parent or legal guardian of the minor applicant whose name is printed on the Aikido Academy Waiver and Release above. I agree that I have read the Aikido Academy Waiver and Release, and I understand its contents. I hereby consent to the above named applicant attending and participating in this Aikido Academy class, event or related activity. I further agree on my own behalf and on behalf of the minor applicant to the terms and conditions stated above in the Aikido Academy Release and Waiver.

I FURTHER ACKNOWLEDGE THAT I UNDERSTAND THAT BY SIGNING THIS FORM, I AM AGREEING ON BEHALF OF THE MINOR APPLICANT NAMED ABOVE AND MYSELF TO RELEASE AND DISCHARGE THE AIKIDO ACADEMY, ITS INSTRUCTORS AND GUEST INSTRUCTORS, THE GRANADA MASONIC TEMPLE ASSOCIATION, AND ANY FELLOW PARTICIPANTS FROM ANY AND ALL LIABILITY FOR INJURY, DAMAGE OR LOSS TO THE APPLICANT OR TO THE APPLICANT'S PERSONAL PROPERTY AS PROVIDED ABOVE UNDER THE TERMS AND CONDITIONS OF THE AIKIDO ACADEMY WAIVER AND RELEASE.

Name of Parent or Legal Guardian
of Applicant

Date

Signature of Parent or Legal Guardian
of Applicant