

WAIVER OF RIGHTS & ASSUMPTION OF THE RISK

I understand and agree that Terry Dow's Academy of Martial Arts will not be held liable for injuries, damages, etc. not caused by or resulting from the negligence of the owners, camp promoters, operators, employees, volunteers or persons in charge of such establishment. For good Consideration, the undersigned jointly and severally hereby forever release, discharge, acquit and forgive Terry Dow's Academy of Martial Arts from any and all claims, actions, suits, demands, agreements, and each of them, if more than one, liabilities, judgment, and proceedings both at law in equity arising from the beginning of time to date of these presents and as more particularly related to or arising from: Any and all camp activities.

This release shall be binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives.

I also waive my rights to power of authority concerning the treatment and decision making of medical treatment of my child in case of an emergency. I give permission to Terry Dow's Academy of Martial Arts, its owners, camp promoters, operators, employees and volunteers to administer basic first aid to my child if needed.

STUDENTS NAME _____

Emergency Contact # _____

Name of Contact _____

Relationship to Child _____

Signature of Student _____

Date: _____

(If under 18, a parent or guardian must sign.)

Please list any specific diet or allergies your child may have and or additional notes for our staff:

REGISTER AT ANY CHARTERED SCHOOL LOCATION, OR CONTACT TERRY DOW FOR MORE INFO.

The Training Station, 200 Elm Street, Manchester, NH 03101
(603) 591-6546 - www.thetrainingstationnh.com

MARTIAL ARTS SYMPOSIUM

ENROLLMENT FORM

Includes up to 2 days of Martial Arts Training.
All instruction and seminars.
With over 20 different instructors.

- All Inclusive Price just \$189 for both days
- Saturday only - \$119
- Sunday only - \$109
- Saturday Night Banquet with masters - \$55

ATTENDING:

- Weekend with Banquet
- Saturday only & Banquet
- Saturday training only
- Sunday training only

Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (Day): _____ Phone (Night): _____

Age: _____ Rank: _____ School: _____

CIRCLE ONE:     CC number: _____ Exp. Date: _____

Signature required by participant over the age of 18 or parent or guardian

Simply return this form with a check made payable to The Training Station or credit card information by March 1. A late fee of \$25 a person will be added after March 1.