

NGUYEN SCHOOL OF TAE KWON DO
Burnsville, Minnesota



Application and Waiver of Liability

Name: _____ Birth Date: _____ Phone: _____

Street: _____ City: _____ State: _____ Zip: _____

I, the undersigned, do hereby voluntarily submit this application for attendance and participation in the martial arts training conducted by the NGUYEN SCHOOL OF TAE KWON DO, its instructors, students, and affiliates and do hereby assume full responsibility for any and all damages, injuries, or losses that I may sustain or incur, if any, while attending or participating, and I hereby waive all claims against the NGUYEN SCHOOL OF TAE KWON DO, Lee's Tae Kwon Do & Self-Defense, ISD 191 Community Education, Nam Nguyen, David Lee, the International Black Belt Federation, or USAT, including its affiliated associations or its of their respective officers, agents, representatives, successors, students, and/or assigns, for any claim for injury that I might sustain.

I fully understand that any medical assistance given to me will be a First Aid treatment type only and will seek doctor's advice of my own volition.

I realize that as a student of the NGUYEN SCHOOL OF TAE KWON DO I will be subjecting myself to strenuous physical exercise and conduct requiring physical contact and I give full consent to such contact as required by the training.

I agree to abide fully by the rules and regulations set forth by the NGUYEN SCHOOL OF TAE KWON DO, its instructors and affiliates, including strict adherence to the rules and regulations relative to the use of safety equipment.

I understand that the NGUYEN SCHOOL OF TAE KWON DO does not warranty any protective equipment it may provide and cannot guarantee the elimination of injury through the use of such equipment.

I submit that I am physically and mentally fit to take the classes offered by the NGUYEN SCHOOL OF TAE KWON DO and I have had an opportunity to observe the training before signing this agreement.

I consent that any pictures furnished by me or any picture taken of me in connection with the NGUYEN SCHOOL OF TAE KWON DO can be used for publicity or promotion and I waive compensation thereto.

I certify that the above information is correct and accurate to the best of my knowledge.

Student's signature: _____ Date: _____

Parent/Legal guardian: _____ Date: _____

Parent/Legal guardian signature required if student is under 18 years of age.