

**Warrior Fighting Sports & Fitness
Student Registration form**

Program(s) of Interest: (circle all that apply)

Date: _____

Boxing

Bootcamp

Kenpo Karate

Women Only Boxing

Kickboxing/Muay Thai

Cooper Ryu Ju-Jitsu

Women Only Bootcamp

Submission Grappling

Personal Training

Name: _____ Date of Birth: _____

Parent/Guardian Name (of minor student): _____

Address: _____ City/State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

Business Phone: _____ Email: _____
(Email required for membership reminders)

Would you like to sign up for our weekly E-Letter? YES or NO
(stay up to date on schedule changes, events, announcements, specials, and more!)

Emergency Contact Name: _____ Relationship: _____

Phone: _____ Email: _____

How did you hear about us? (circle all that apply)

Internet Search

Friend/Current Member

Craigslist

Walk-by

Flyer

Boxing Show/Competition

Newspaper

Other _____

Do you have any medical condition or injury that would limit your training? Yes No
If so, explain: _____

Are you currently taking any medications? Yes No
If so, explain: _____

Are you allergic to any medications (*in case of emergency*)? Yes No
If so, explain: _____

WARRIOR FIGHTING SPORTS & FITNESS, INC.

YOUTH WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in any Warrior Fighting Sports & Fitness, Inc. programs, classes and related events and activities, the undersigned:

1. Agrees that the parent(s) and/or legal guardian(s) of the Student should inspect the facilities and equipment to be used, and if the parent or guardian believes anything is unsafe, he or she should immediately advise an instructor of such condition(s) and refuse to allow the Student to participate.
2. Acknowledges and fully understands that each Student will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence, but the actions, inactions and negligence of others, or the condition of the premises or any equipment used. Further, that there may be other risks not known or not reasonably foreseeable at this time.
3. Assumes all the foregoing risks and accepts personal responsibility for the damages following such injury, permanent disability or death.
4. Releases, waives, discharges, covenants not to sue, holds harmless and indemnifies Warrior Fighting Sports & Fitness, Inc., an Illinois corporation, its affiliates, successors and assigns, their respective administrators, directors, shareholders, officers, instructors, employees, principals and any and all other agents, other students, members or participants, sponsoring agencies, sponsors, advertisers, and owners and/or lessors of the premises used to conduct any program, class, event or activity, all of which are hereinafter referred to as "Released Parties", from any and all liability to each of the undersigned, his or her heirs, next of kin, executors, personal representatives, agents and assigns for any and all claims, injuries, demands, losses, damages, costs and expenses, including but not limited to death and damage to property, caused or alleged to be caused in whole or in part by the Released Parties or otherwise.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Name of Student (print) _____

Name of Parent/Guardian (print) _____

Parent/Guardian Relationship (print) _____

Signature of Parent/Guardian _____

Telephone Number of Parent or Guardian _____