

SUIGETSUKAN
103 International Blvd.
Oakland, CA 94606

Emergency Information
(so please print clearly!)

Name: _____ Phone : _____

Address: _____

Email address: _____ Starting Date _____

Class(es) check all that apply: Jujitsu Aikido Toyama Ryu other (_____)

Date of Birth _____ Health Coverage _____

Are there any health concerns we should be aware of? _____

Allergies or additional info (med #s, etc) _____

Emergency Contact _____ Phone _____

Please update if the above information changes.

The Release:

I, _____, the undersigned guest of Suigetsukan (hereafter called "school") acknowledge that I am applying to participate in a martial arts class involving strenuous exercise and personal body contact. As a condition of being admitted to the school as a student, I assume the risk of injury and do hereby hold the school, its employees and agents harmless from any and all liability (including attorney's fees and costs) for all claims, actions or damages due to injuries suffered by me or caused to third parties by me, arising out of activities involving the school, whether occurring on the premises of the school or elsewhere, excepting only those claims, actions or damages caused by intentional hostile act.

I agree to abide the rules of the school and to follow explicitly all instruction given by instructors during the course of the class.

Student's Signature _____ ***Date*** _____

(if under 18 years, parent or guardian must also sign)

Parent/Guardian _____ ***Date*** _____