

WINDING RIVER TAEKWON-DO

OCTOBER 15, 2012

REGISTRATION FORM

Name:
Address:
E-mail Address:
Phone:
Date of Birth:

Do you have any medical conditions that the instructor should be aware of?
(please circle) yes no
If yes, specify:

Have you participated in any other martial art program?
If yes, please include: school, instructor and dates:

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Why would you like to learn Taekwon-Do?

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Student Agreement - Terms and Conditions

1. The student agrees while using the facility or any of the services provided by the facility, he/she will not conduct himself/herself in any way which presents a danger to or creates a nuisance for the instructor or any other persons using the facility.
2. The Student Agreement may be cancelled at any time by the facility if the student is deemed to be: (a) posing a danger to the facility, it's employees or members, or (b) a nuisance to the operation of the facility.
3. The student must have a valid membership to participate in classes.
4. No student shall be permitted into classes if his/her account is considered delinquent.
5. The instructor shall have the right to demand full payment of any outstanding balance. The student shall make all requested payments before regaining access to the facility.
6. The student hereby releases Winding River Taekwon-Do and any of its instructors from: (a) any claim arising from disease, deterioration of health, illness or aggravation of ill health as a result of participation in the program, acceptance of any advice or use of the facility provided by Winding River Taekwon-Do and: (b) any claim for personal injury sustained by the student in, on or about the facility provided by Winding River Taekwon-Do including, without limitation, any claims for personal injury resulting from or arising out of negligence of Winding River Taekwon-Do instructors or agents of any other person using the facility. Further, the member acknowledges he/she is using the facility at his/her own risk.
7. The student acknowledges the facility is not liable for any theft of his/her personal items which may occur at the facility.
8. The student warrants that he/she is in good physical condition or has obtained the express approval of a physician to engage in physical activities such as offered by the facility. The instructor retains the right to deny access to any student who has open cuts, infections, illnesses or communicable diseases.
9. The student is not entitled to assign this Agreement or his/her membership to any other person.
10. The student acknowledges there are two pages to this Agreement and he/she has read and understood both and is agreeable to both.

I hereby wish to become a student of Winding River Taekwon-Do. I agree to abide by the rules, terms and conditions and I will uphold the spirit and traditions of Taekwon-Do.

Date:	Print Name:	Signed:
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Parent's signature for consent, if under 19 years of age.

Date:	Print Name:	Signed:
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