



Camp Registration 2011

Name _____ Phone Number(s) _____

Address _____

e-mail address _____

Rank _____ Instructor _____

I (print your name) _____, the undersigned, do hereby voluntarily submit my application for participation in the DMA Fellowship Camp, and I state that I am physically fit to participate in this event and acknowledge that the fighting aspect of this training involves bodily contact and the existence of personal risk. In consideration for being permitted to participate in the camp, I hereby assume all risk and will indemnify and hold harmless from any liability, actions, causes, debts, claims, and demands of every kind whatever, which I now have, or which may arise, in connection with my participation, the following parties: Damian Wilson; Disciple Martial Arts, Brian Duffy; Brian Duffy's Kenpo Karate; the American Kenpo Federation; Rich Hale; Pacific Kenpo and the employees and staff of the aforementioned entities as well as the instructors and other participants of this camp.

I give permission for emergency first aid to be rendered in the event of an injury. Should it be determined that further medical attention is required; I give permission to be transported to the closest available medical facility for private and/or emergency medical services/treatment. I also give permission for the administration of any medication and/or procedure deemed necessary by a qualified medical doctor to myself (or to my child until my arrival). I will solely responsible for all costs of any such medical services/treatment/procedures rendered. I am allergic to the following medications and have the following conditions which should be considered when treating me for illness or injury:

I give permission for my likeness and image to be used in connection with any commercial or promotional enterprise conducted by the sponsors of this event without any compensation for myself and I release the producers of any such promotional activities from any liability, actions, causes, debts, claims, and demands of every kind whatever which I now have, or which may arise, in connection with my participation.

In summary, I state that the above named student is physically fit to participate in said prescribed course and acknowledge the existence of personal risk like any sport. The student further understands that strict observation of the rules and regulations relative to training include the use of protective equipment required by the studio. This equipment will largely eliminate the possibility of accident or injury; however, the studio does not warrant the protective equipment. The student further agrees to waive any claim of damages against the studio and/or its principles or its instructors in any case resulting from the activity. Any photographs or videotapes taken during the studio activities may be used for promotional purposes.

Student Signature _____ Printed Name _____

Guardian Signature _____ Printed Name _____

(If student is under 18 years of age, this Agreement must be signed by a parent or guardian)

Cost: \$150 for Adults; \$50 for Children

Type of Payment: circle one

Visa Mastercard Discover Check Cash

I authorize Disciple Martial Arts to charge above circled method of payment each month as described above.

Name as it appears on credit/debit card or check _____

Authorizing Signature _____ Date _____

Rules of the Camp:

1. NO Alcoholic beverages are allowed on the premises.
2. NO Tobacco products are allowed on the premises.
3. NO Profanity or abusive language.
4. Jewelry is not allowed during classes or sessions.
5. All instructors are to be addressed as "Sir" or "Ma'am."
6. Keep uniforms neat and clean.
7. Keep fingernails and toenails short and clean.
8. Do not criticize others.
9. Do not attempt to teach others unless directed to do so.
10. Eating, drinking (other than water), and gum chewing is not allowed in the studios.
11. Please do not touch or lean on walls or mirrors.
12. Please keep studios neat and clean by picking up all trash and personal belongings.

I have read and understand each of the rules and how they apply to me.

Student Signature _____ Printed Name _____