

Detroit Kendo Dojo

Waiver of Liability Form

For and in consideration of my participation in the practice of Kendo and all other activities of the DETROIT KENDO DOJO, I, for myself, my executors, administrators, and assigns do hereby release and agree not to sue the DETROIT KENDO DOJO, its officers, instructors, and administrators; MWKF or AUSKF, its officers, instructors, and administrators; fellow participants; other clubs or dojos; third party organizations including but not limited to sponsors, and those allowing the use of their premises for DETROIT KENDO DOJO activities, jointly and/or severally, and hold and save them harmless from and against any and all actions, claims, liabilities, loss, damage, expense of whatever nature, including attorney fees, which may at any time be incurred by reason of my participation or my preparation in DETROIT KENDO DOJO sponsored activities. I attest and verify that I have full knowledge of risks involved in Kendo and am physically fit and able to participate.

Where the contestant is a minor, I the parent or guardian, do agree to the waiver and give permission to DETROIT KENDO DOJO officials to seek medical attention for my son or daughter in the event of sickness or injury.

---*Please fill out legibly*---

E-mail Address _____

Participant's Name(Print) _____

Participant's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(if under 18 yrs of age)

Home Address _____ City _____

State _____ Zip Code _____ Phone Number _____

