



Women's Self-Defense Registration/Release Form

Name _____ Parent's Name _____
(First & Last) *(If under 18 years old)*

Address _____ Email Address _____

City, State, Zip _____ Home Tel. # _____

Daytime phone _____ Age _____ Birth date _____

Course _____ Date _____ Location _____

Please be aware that the Women's Self-Defense classes serve as an introduction to a more thorough program. Although participants will learn valuable skills and hopefully increase their awareness level, participants are encouraged to partake in the 9-hour Rape Aggression Defense (RAD) Women's Basic Physical Defense course in order to receive optimal benefits.

RELEASE FOR WOMEN'S SELF-DEFENSE

The undersigned hereby acknowledges to Master O's Taekwondo, Staff, Instructor(s) and Assistants of this class:

That she will not participate in any aspect of the program she is uncomfortable with or considers unsafe.

That should she choose to participate, is aware of the physical nature and possible risks of injury incident to taking this practical course in self-defense. That she is physically fit to participate in this course, involving various physical techniques, and she realizes that self-defense techniques cannot be successfully employed in every situation, and proficiency can only be achieved and is dependent upon thorough continued practice, exercising good judgment, and a person's natural abilities.

The undersigned hereby releases Master O's Taekwondo its staff, instructors and assistants of this class and agrees to hold them harmless, from any liability for injury that may be incurred as a result of participation in this course, or using the strategies within for defense.

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

Student Signature

Parent /Guardian Signature (if under 18)

Date