



# SOSEIKAN Dojo

Charles M. Christensen Terrace Center

11500 S. Beloit (3 blocks west of Harlem Ave.)

708-448-7080 / 773-936-1115

合氣道

居合道

## SPECIAL EVENT

### Germanov Sensei Seminar

July 10 - 11 - 12th 2008

Print Your Name: \_\_\_\_\_

EMAIL Adress: \_\_\_\_\_

Where do you study : \_\_\_\_\_

### Release of Liability (Please read before you sign)

For and in consideration of the permission of Martial Arts Inc. of Oak Lawn, herein after called Soseikan Dojo, to use its rented, leased or owned facilities and of the execution by others of agreements similar hereto, the undersigned here by agrees that by the participating in classes held by Soseikan Dojo or while using its facilities or equipment, whether at Worth Park district or at any other location for the purpose of practice or of demonstration, said premises, facilities, and equipment shall be occupied and used at the sole risk and responsibility of the undersigned, and the undersigned hereby releases Soseikan Dojo from any and all claims for personal injury, damage, or loss of any kind or description resulting from being thereon or from such use or from the acts of any persons thereon. The undersigned further agrees to indemnify and hold harmless Soseikan Dojo and each of its instructors, teachers, officers, directors, and members from or against any and all claims made or instituted against it or them arising out of the acts of the undersigned while upon the premises of Soseikan Dojo or while using any of its facilities or equipment, whether at the Soseikan Dojo or any other location for the purpose of practice or demonstration, including injury or loss to the undersigned however caused and injury or loss caused by the undersigned to any other person.

I certify by my signature that I have read and understand this agreement in its entirety and all of the questions regarding it have been fully answered. I understand that Soseikan Dojo documents activities and events involving classes, demonstration and instruction. I give Soseikan Dojo permission to use any documentation such as video and audio recording by film or digital means and photography, in which my image is taken in whatever way Soseikan Dojo wishes. I understand that Soseikan Dojo is the sole owner of this documentation.

Participant's Name (Please PRINT):	Date:
Participant's Signature: X	
Parent / Legal Guardian Signature REQUIRED if Participant is Under 18.	
Parent / Legal Guardian Name (Please PRINT):	Date:
Parent / Legal Guardian Signature: X	

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