



The LEAGUE WAKO Sparring Skills Camp

First Name/Last Name:

Gender: (circle one) Male OR Female

Current Belt Rank:

Date Of Birth:

Competition Age (as of 01/01/19):

Weight:

Height:

Home Address:

City:

State:

Zip Code:

Dojo/Training Center:

Instructor/Coach:

Emergency Contact Name:

Cell Phone:

Email Address:

I, hereby waive any and all rights or claims I may have against The LEAGUE, it's staff, vendor's, volunteers or Sponsors, and all their agents, servants & employees, and I hereby release & discharge them from any and all claims resulting from injuries, including death, damages or loss, which may accrue to me or my heirs arising out of or in any way connected with my attendance &/or participation at any The LEAGUE sanctioned event. I represent and warrant that I am physically and mentally fit, able to participate, & I do hereby assume responsibility for my own well-being, understanding that participation involves bodily contact. I have read, understand and agree to abide by The LEAGUE rules associated with The LEAGUE events & assume all responsibility & any liability for infringement of such rules & agree to accept the tournament arbitrator's decision as final. I consent to allow any reproductions of me or likeness created in any manner whatsoever, photographed, filmed or video taped in connection with The LEAGUE events which can be used for instruction, publicity, promotion or television broadcast & I waive any & all compensation in regards thereto. I agree that I have obtained permission from the artists of any music I use in conjunction with my competition & verify by signing this permission that in doing such, I will indemnify, defend & hold harmless all the above named parties from any liability for use of such music & that this artist's permission permits the above named parties to use such music in recorded performances of myself for instructional purposes, publicity, promotion, video &/or televised broadcast & I waive any & all compensation for such.

____/____/2019