

Both Hands Clapping Standard Release Form

I am aware that practicing any martial art can be a dangerous activity involving MANY RISKS OF INJURY. I understand that the dangers and risk of practicing aikido include, but are not limited to, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system and serious injury or impairment to other aspects of my body, general health and well-being. I understand that the dangers and risk of practicing aikido may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities, and generally to enjoy life.

Because of the dangers in practicing any martial art, I recognize the importance of following rules and regulations established by the Both Hands Clapping instructors, and agree to obey such instructions. I also realize that I have the right to decline participation in any activity that I feel may be beyond my ability to perform safely.

I acknowledge that I am in good physical condition and do not know of any condition or reason that I should not be able to practice aikido.

I recognize and acknowledge that Both Hands Clapping does NOT carry special health insurance in the event I should sustain an accidental injury while in the dojo.

I understand the risks involved in practicing aikido and I am voluntarily participating. By my signature below, I hereby recognize and assume all risks associated with practicing aikido and agree to hold the Both Hands Clapping, its employees, agents, representatives, and volunteers harmless from any and all obligations, liabilities, claims, demands, costs, and expenses, including attorney's fees, or demands of any kind and nature whatsoever which may arise by or in connection with my participation in any activities related to aikido. The terms hereof serve forever as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

In signing this Release, I acknowledge and represent that I have read it, understand it, and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from this Release have been made.

Date _____

(Print name)

(Signature)

IT IS STRONGLY RECOMMENDED THAT EACH STUDENT HAVE INSURANCE WHICH COVERS ACCIDENTS WHICH MAY OCCUR DURING PARTICIPATION IN BOTH HANDS CLAPPING CLASSES.