Maplewood Karate LLC AGREEMENT APPLICATION FOR TRAINING

Today's Date:		Student Name:
Age:	_Telephone:	Mobile:
Parent Name:		Another Parent:
Address:		
Email: (Please	print clearly)	
KARATE LLC, sporting and at mentally fit to pand skills acque MANNER: that MAPLEWOOD ACCIDENTS aconnection with ABSOLVES Mand from any all INJURIES, who any of them. It aphotographs of Karate LLC proferedunds and we are due one mental sports and we are due one mental sports.	has fully informed thletic activities to carticipate in such ired from MK SJ he/she will abide KARATE LLC.; and INJURIES of a said activities, and ALL LIABILIT ether the same a calso authorize the rideo taken of a corresponsionth before new	sents, and acknowledges, that MAPLEWOOD d him/her of the nature and risks involved in the nught by MK SJ; that he/she is physically and activities; that he/she will not use the knowledge IN ANY WAY BUT A DISCREET AND JUDICIOUS by the RULES AND REGULATIONS of that he/she assumes the risk of any and all any kind sustained by him/her by reason of or in and hereby RELEASES DISCHARGES AND RATE LLC, its agents, programs and employees for Y or RESPONSIBILITY for such ACCIDENT or re caused by or attributable to their negligence of at Maplewood Karate LLC has the right to use all ne or my child while participating in the Maplewood ising and promotional material. Our policy is no ible for over scheduling your child. Tuition payments session starts.
AGREEMENT	DATE	
PARENT OR G	BUARDIAN OF S	TUDENT(SIGN)
Studio use only	/.	

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that Maplewood Karate LLC (Studio) has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19. I further acknowledge that the Studio cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, studio staff, and other studio clients and their families. I voluntarily seek services provided by Maplewood Karate LLC and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending my appointment.

- * I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- * I have not traveled internationally within the last 14 days.
- * I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- * I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- * I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities.
- * I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

 I hereby release and agree to hold Maplewood Karate LLC harmless from, and waive on

behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the studio, or that may otherwise arise in any way in connection with any services received from Maplewood Karate LLC. I understand that this release discharges the Studio from any liability or claim that I, my heirs, or any personal representatives may have against the studio with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Maplewood Karate LLC. This liability waiver and release extends to the Studio together with all owners, partners, and employees.

Signature	Date