

Be Strong, Courageous and Gentle

## **Membership Registration Form**

Today's Date:			
Member Information:			
Name (First, MI, Last)			
Date of Birth	Age		Sex □ Male □ Female
Address		City	Zip Code
Email Address			Send monthly bill here? □ Yes □ No
Home Ph:	Work Ph:		Cell Ph:
Minor's Father/Guardian _			
Email Address			_ Send monthly bill here? $\square$ Yes $\square$ No
Home Ph:	Work Ph:		Cell Ph:
Minor's Mother/Guardian			
Email Address			_ Send monthly bill here? $\square$ Yes $\square$ No
Home Ph:	Work Ph:		Cell Ph:
Medical Issues/Physical Lii	mitations:		
Medical or physical proble	ems that the instruct	or should b	e aware of
(i.e. Asthma, epilepsy, hea	ırt problems, medico	ation, allerg	ies, or any limiting problems):
Emergency Contact Inform	nation (if different fro	om above):	
			Relationship
			Cell Ph:
Previous Judo Experience:			
Dojo/Sensei		_ Current F	Rank Yrs Experience
How did you hear about H	JC (circle one)?	Internet M	ember Other
Why are you interested in	taking judo at HJC?		



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# Honolulu Judo Club Waiver and Release of Liability

NAME OF PARTICIPANT	DATE
NAME OF PARTICIPANT'S PARENT(S) PARTICIPANT:	OR GUARDIAN(S) AUTHORIZED TO SIGN WAIVER FORM FOR
CLUB: HONOLULU JUDO CLUB	
ASSEMBLIY OF GOD of HONOLULU, participate in the Participatory Activity, I do waive, release, and absolutely and forever HONOLULU JUDO CLUB, the CEDAR respective officers, agents, representatives, s for injuries of any kind whatsoever up to a liability and liabilities, demands, losses and suffered as a result of any association with	SOCIATION OF HAWAII, the HONOLULU JUDO CLUB, the CEDAR and GS INDUSTRIES, acceptance of my entry and for allowing me to hereby for myself, the Participant, my heirs, executors, and administrators discharge the 50 <sup>TH</sup> STATE JUDO ASSOCIATION OF HAWAII, the ASSEMBLIY OF GOD of HONOLULU, GS INDUSTRIES and their auccessors, and assigns from and on account of any and all rights and claims and including death, obligations, controversies, actions, causes of actions, damages (hereinafter collectively "Damages") which may be sustained and and/or entry in the Participatory Activity, including but not limited to any participating, and/or returning from such Participatory Activity.
participation in the Participatory Activity ma	ature, extent and results of injuries, damages and losses resulting from ay not be known and anticipated, and the waivers and releases herein cover damages and losses resulting from said activities whether or not known or
STATE JUDO ASSOCIATION OF HAWA of HONOLULU, GS INDUSTRIES and tagainst any and all liability, cost and expense claims of workers' compensation insurers, to may be asserted by and/or on behalf of any arising directly out of the Participating Activity	y covenant and agree to indemnify, defend and forever hold harmless 50 <sup>TH</sup> AII, the HONOLULU JUDO CLUB, the CEDAR ASSEMBLIY OF GOD heir respective officers, agents, representatives, successors, and assigns resulting from any claim, demand, suit, action or cause of action (including emporary disability insurers, medical insurers and no-fault insurers) which y person for injury or damage sustained by myself and/or the Participant vities.  ave been duly executed this day of,
Participant's Name	Parent/Legal Guardian
Participant's Signature	Parent/Legal Guardian's Signature (by signing above, you represent that you have the authority to sign for yourself and to bind the Participant to the terms herein).

#### WARNING! WAIVER AND RELEASE OF LIABILITY AND AGREEMENT TO PARTICIPATE

In consideration of being permitted to participate in any way, including travel to and from, in any Judo tournament, practice, clinic, and related events and activities ("Activity") of the United States Judo Federation, Inc., 50<sup>th</sup> State Judo Association, Honolulu Judo Club, Cedar Assembly of God, GS Industries, and the officers, employees, volunteers, and agents, I agree:

- 1. I understand the nature of Judo activities and believe I am qualified to participate in such Activity. I also understand the rules governing the sport of Judo.
- 2. I further acknowledge that prior to participating, I will inspect the mats, equipment, facilities, competition pools or divisions, and the elimination or scoring system to be used, and if I believe anything is unsafe or beyond my capability, I will immediately advise my coach, supervisor, and/or a tournament official of such conditions and refuse to participate.
- 3. I acknowledge and fully understand that I will be engaging in a contact sport that might result in serious injury, illness or disease, including permanent disability or death, and severe social and economic losses due not only to my own actions, inactions or negligence, but also to the actions, inactions, or negligence of others, including United States Judo Federation, together with their affiliated clubs, their respective administrators, directors, officers, agents, coaches, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, legal guardians, supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors, and lessees of premises used in conducting the event (Releasees), the rules of the sport of Judo, or conditions of the premises or of any equipment used. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time.
- 4. Knowing the risks involved in the sport of Judo, I assume all such risks and accept personal responsibility for the damages following such injury, illness, disease, permanent disability, or death.
- 5. I hereby release, waive, discharge and covenant not to sue the United States Judo Federation, Inc., 50<sup>th</sup> State Judo Association, Honolulu Judo Club, Cedar Assembly of God, and GS Industries, together with their affiliated clubs, their respective administrators, directors, officers, agents, coaches, and other employees or volunteers of the organization, event officials, medical personnel, other participants, their parents, legal guardians, supervisors and coaches, sponsoring agencies, sponsors, advertisers, and if applicable, owners, lessors, and lessees of premises used in conducting the event, all of whom are hereinafter referred to as "Releasees", from any and all litigation expenses, attorney fees, loss, liability, damage or costs on account of injury, illness, disease, including permanent disability and death or damage to property, caused or alleged to be caused in whole or in part by the negligent acts or omissions of the Releasees or otherwise to the fullest extent permitted by law.

I HAVE READ THE ABOVE WARNING, WAIVER, AND RELEASE, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND KNOWING THIS, SIGN IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE. I AGREE TO PARTICIPATE KNOWING THE RISKS AND CONDITIONS INVOLVED AND DO SO ENTIRELY OF MY OWN FREE WILL. I AFFIRM THAT I AM AT LEAST 18 YEARS OF AGE, OR, IF I AM UNDER 18 YEARS OF AGE, I HAVE OBTAINED THE REQUIRED CONSENT OF MY PARENT/LEGAL GUARDIAN AS EVIDENCED BY THEIR SIGNATURE BELOW. I INTEND THIS TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THAT THE BALANCE, NOTWITHSTANDING SHALL CONTINUE IN FULL FORCE AND EFFECT.

Participant	Participant's Signature	Date		
FOR PARENTS/LEGAL GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION)				
which may incur as the result of the minor	the Releasees, and, for myself, my heirs, a rmless the Releasees from any and all liabili- ing litigation expenses, attorney fees, loss, lar child's participation in these programs as extent permitted by law. I have instructed the	ssigns, and next of kin, I ties incident to my minor liability, damage or costs provided above, even if		
Parent/Legal Guardian	Parent/Legal Guardian's Signature	Date 507, V7.0.0, 210312.docx		

### **GRANT OF PUBLICITY RIGHTS & RELEASE OF CLAIMS**

#### Please use one form per person.

I, the undersigned, hereby give **Honolulu Judo Club** and its agents, employees, successors, assigns, affiliates, and licensees, the full and unrestricted right and permission, in perpetuity and throughout the world, to use my name and/or likeness without previous notification or compensation. This right is granted to any and all uses of my name and/or likeness, whether captured by photograph, video, audio recording, or any other method, for any lawful purpose, including, but not limited to, publicity, advertising, and community education, and in any manner or format, including, but not limited to, printed materials, audio/video productions, and online formats (including email, websites, social media, and mobile marketing).

I hereby release, acquit, and forever discharge **Honolulu Judo Club** and its officers, directors, employees, agents, affiliates, and licensees from and against any and all claims, actions, causes of action, and liability, of any kind or nature, arising out of any use of my name, likeness, or voice in any lawful manner pursuant to this document.

I waive any right to pre-approve or review any use of my name, likeness, or voice by **Honolulu Judo Club** pursuant to this document.

I understand and agree that this Grant of Publicity Rights & Release of Claims will be construed in accordance with the laws of the State of Hawaii and the United States of America and that if any portion of this Grant of Publicity Rights & Release of Claims is held to be invalid, the balance shall continue in full force and effect.

AM 18 YEARS OF AGE OR OLDER	□ NO*			
NAME (PRINT)				
ADDRESS	<del></del>			
SIGNATURE	DATE			
HONOLULU JUDO CLUB WITNESS/AGENT (PRINT NAME) _	<del> </del>			
WITNESS/AGENT TITLE				
If the person signing is under 18, consent must be given by a phereby certify that I am the parent or legal guardian of the about Publicity Rights & Release of Claims, and do hereby give my combove-named minor.  PARENT / LEGAL GUARDIAN NAME (PRINT)	ove-named minor. I have read and understand this Grant of consent, without reservations, to the foregoing on behalf of the			
SIGNATURE	DATE			
*********				
D PLEASE EXCLUDE THE FOLLOWING:				
NAME (PRINT)				
SIGNATURE	DATE			
PARENT / LEGAL GUARDIAN NAME (PRINT)				
SIGNATURE	DATE			