



# SOUTH DELTA KYOKUSHIN KARATE

## Registration Form

Name	<input type="text"/>	Email	<input type="text"/>				
Address	<input type="text"/>		Home Phone	<input type="text"/>			
City	<input type="text"/>	Prov.	<input type="text"/>	Postal Code	<input type="text"/>	Cell Phone	<input type="text"/>
Birth Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	Care Card #	<input type="text"/>		

For applicants under legal age:

Parent / Guardian 1	<input type="text"/>	Parent / Guardian 2	<input type="text"/>
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### ICE Contact:

In case of emergency, please contact:	<input type="text"/>	Home Phone	<input type="text"/>
		Cell Phone	<input type="text"/>

Does the applicant currently suffer from any ailments of:

- Knees    
  Back    
  Joints    
  Hands    
  Feet    
  Respiratory System  
 Other ~ Specify: \_\_\_\_\_

Please explain how these ailments may affect you so we can better understand your limitations

Are there any medications we should be aware of?

I hereby authorize the instructors in charge, to secure such medical advice and services as may be deemed necessary for the health and safety of myself, and /or my child. I agree to accept financial responsibility in excess of the benefits allowed by provincial Health Insurance.

I also understand that in no way, will I/or any family member, hold the instructors responsible for any injuries, while participating in Kyokushin Karate

Print this form

Sign this form and bring it to your first class

Office Use Only	I KO #	<input type="text"/>	Type	<input type="text"/>	Initiation Date	<input type="text"/>	<input type="checkbox"/> Book Issued
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# South Delta Kyokushin – Photo release

I hereby authorize South Delta Kyokushin Karate, hereafter referred to as "Company," to publish photographs taken at or during regular trainings, and other karate related events, of myself and/or the minor child or children listed below, and our names and likenesses, for use in the South Delta Kyokushin Karate's print, online and video-based marketing materials, as well as other Company publications.

I hereby release and hold harmless South Delta Kyokushin Karate from any reasonable expectation of privacy or confidentiality for myself and for the minor child and children listed below associated with the images specified above. Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize South Delta Kyokushin Karate to use their likenesses and names.

I further acknowledge that participation is voluntary and that neither I, the minor child, or minor children will receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other Company publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release South Delta Kyokushin Karate, its contractors, its employees and any third parties involved in the creation or publication of Company publications, from liability for any claims by me or any third party in connection with my participation or the participation of the minor children listed below.

NOTE: This release does not authorize persons, participants, observers or other, the right to release the signer's or minors image or likeness on any form of publication.

Authorization:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Relationship to Children: \_\_\_\_\_

Names and Ages of Minor Children:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_