

Release Form for March break judo camp March 13 to 17, 2023

NOTICE: This is a legal document, which must be properly completed and signed. PLEASE READ CAREFULLY. It affects your rights. If you do not understand it, obtain legal advice before signing.

RELEASE, INDEMNITY, WARRA	ANTY, AND ASSUMPTION OF RISK
"this event"), I/We for myself/ourselves and for and on be discharge, and agree to indemnify and save harmless The (Annex Judo Academy), (120 Howland Ave Toronto), the agents, servants and representatives (hereinafter referred costs, expenses and demands in respect of death, injury, I myself/ourselves, howsoever caused, arising out of or in activities and notwithstanding that the same may have be	(s) at the (JUDO CLUB NAME0 (hereinafter referred to as behalf of the said child hereby release, remise and forever to Ontario Judo Black Belt Association, the organizers of the eir respective officers, executives, directors, officials, to as "the Releases") from and against all claims, actions, oss or damage to the person or property of the said child, or connection with the said child participating in these judo
I/We agree for myself/ourselves and for and on behalf of unknown, and all consequences thereof, arising out of or in this activity and to adhere to all rules, regulations and	in connection with the said child competing or participating
I/WE CERTIFY THAT:	
1. The said child is in good physical condition and has no injury, disease or disability nor has he/she injected or ingested anything that would impair his/her performance or physical condition or increase the likelihood of injury in competing or participating in this event.	

- 2. No physician, nurse, therapist, trainer, coach, manager or other person has advised me/us not to allow the said child to compete or participate in a body contact sport or in this event.
- 3. I/We am/are aware that there is a high risk of injury by the very nature of the sport.
- 4. We are the father and/or mother of the said child or the Guardian(s) of the said child and the only person(s) entitled to act for and on behalf of the said child.

THIS DOCUMENT SHALL BE BINDING UPON THE SAID CHILD, MYSELF/OURSELVES, THE HEIRS, EXECUTORS, ADMINISTRATORS, ASSIGNS, AND PERSONAL REPRESENTATIVES OF EACH OF US AND THE SAID CHILD.

1/We have read this document and I/we understand it fully.

PARENT/GUARDIAN	PARENT/GUARDIAN	DATE:
SIGNED:		
SIGNED		
PRINT NAME / RELATIONSHIP	PRINT NAME / RELATIONSHI	







Boys & Girls March break Judo Camp 2023 March 13th to March 17th

9am to 4pm

General information application

Name	Date of birth
E-mail	Ontario Health Card#Optional
Doctor's Name:	Tel
Please list medical conditions and/or allergies	:
My son/daughter has judo experience	· · · · · · · · · · · · · · · · · · ·
Parents/Guardians Name:	Tel
Alternate Contact Person:	Tel(Daytime) Tel(Daytime)
Parent/Guardian's Name	
Parent/Guardian's Signature	Date
• •	Howland Ave) between 8:30am to 9am ee late pick until 4:30pm if required by appointment
Please e-transfer camp fees \$350 to David	l Miller - judodave11@yahoo.ca
For inquires contact Camp Director/ Hea David Miller: judodave11@yahoo.ca	nd Instructor: