Mississauga Judo | Shin Bu Kan Judo Club
2359 Royal Windsor Drive, Unit 11
Mississauga, ON L5J 4S9
www.mississaugajudo.com

REGISTRATION INFORMATION FORM

Name	Date of Birth	Medical Conditions/Allergies

Cell #: _____ Home #: _____

Email: _____

EMERGENCY CONTACT INFORMATION FORM

Emergency Contact Name: _____

Relationship: _____

Phone Number: _____

MEDIA CONSENT

By checking the box below and signing, I give permission to appear in all photos, videos and other media recordings taken at various Judo-related events including, but not limited to, tournaments, training sessions, and seminars while I am a member(s) of Mississauga Judo Club.

Further, I authorize Mississauga Judo Club to post any media recordings, including, but not limited to photos, videos, and news clippings, on the club's website, social media postings.

◯ I give permission ◯ I **DO NOT** give permission

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RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT – ADULT

By signing this document, you will waive certain legal rights, including the right to sue. Please read carefully.

1. This is a binding legal agreement; therefore, clarify any questions or concerns before signing. As a participant in the programs, activities and events of Mississauga Judo Club, the undersigned acknowledges and agrees to the following terms:

Disclaimer

2. Mississauga Judo Club and its directors, officers, committee members, members, employees, volunteers, participants, agents and representatives (collectively the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, the sport of judo and any program, activity or event of the Organization, caused in any manner whatsoever including, but not limited to,the negligence of the Organization.

☐ **I have read and agree to be bound by paragraphs 1 and 2.**

Description of Risks

3. I am participating voluntarily in the sport of judo and the activities, events and programs of the Organization. In consideration of my participation in the sport of judo and the programs, activities and events of the Organization, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to the sport of judo and the programs, activities and events of theOrganization. The risks, dangers and hazards include, but are not limited to, injuries from:

    a. Executing strenuous and demanding physical techniques in judo;
    b. Dryland training including weights, running and massage;
    c. Vigorous physical exertion, rapid movements, quick turns and stops, and strenuouscardiovascular workouts;
    d. Exerting and/or stretching various muscle groups;
    e. Collisions, falling, tumbling or hitting any apparatus, the floor, mats or other surfaces;
    f. Physical contact with other participants;
    g. Striking participants and/or objects;
    h. Contact, colliding or being struck by other participants;
    i. Being thrown to the floor;
    j. Falls due to uneven or irregular surfaces;
    k. Failure to participate within one's abilities;
    l. Failure to properly use any piece of equipment or from the mechanical failure of any pieceof equipment;
    m. Spinal cord injuries which may render me permanently paralyzed; and/or
    n. Travel to and from competitive events and associated non-competitive events, which are anintegral part of the Organization's activities.

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4. Furthermore, I am aware:

    a. That injuries sustained can be severe;
    b. That I may experience anxiety while challenging myself during the activities, events andprograms;
    c. That my risk of injury is reduced if I follow all rules established for participation; and
    d. That my risk of injury increases as I become fatigued.

Release of Liability

5. In consideration of the Organization allowing me to participate, I agree:

    a. That my physical condition has been verified by a medical doctor to participate in the sportof judo and in the activities, events and programs of the Organization;
    b. To assume all risks arising out of, associated with or related to my participation;
    c. To waive any and all claims that I may have now or in the future against the Organization;
    d. To freely accept and fully assume all such risks and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in the activities, events and programs of the Organization; and
    e. To forever release the Organization from any and all liability for any and all claims, demands,actions and costs that might arise out of my participation in the activities, events and programs of the Organization, due to any cause whatsoever, even though such risks, injuries, loss, damage, claims, demands, actions or costs may have been caused by the negligence or breach of any duty of care of the Organization.

Acknowledgement

I acknowledge that I have read this agreement and understand it, that I have executed this agreementvoluntarily, and that this agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

☐ **I have read and agree to be bound by paragraphs 3-5.**

Date: _____

If participant is under age 18, please have a parent/guardian sign.

Participant 1 Name: _____ Signature: _____

Participant 2 Name: _____ Signature: _____

Participant 3 Name: _____ Signature: _____

Participant 4 Name: _____ Signature: _____