

**SOUTH COAST KARATE**

SCK USE ONLY  
Class Fee =

Student's Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Parent's/Legal guardian's name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I, the adult student, or guardian of the minor student listed above, do consent and agree that SOUTH COAST KARATE ORGANIZATION, and any sponsoring organization, facility instructor, and any other party involved are hereby released and held harmless from all claims and liability due to any injuries and/or damages I may suffer as a result of ordinary negligence or carelessness including the risk that are incidental to the participation in the karate program. Student and/or guardian is familiar with the risks associated with this sports program and assumes these risks. It is acknowledged that negligent and even careless conduct is an inherent risk of this sport.

It is further agreed that student or guardian will defend, indemnify and hold harmless SOUTH COAST KARATE, and its employees, from any claims arising from injury caused by student.

The Undersigned hereby grants SOUTH COAST KARATE, without expectation of compensation of any kind, the unrestricted right and permission to copyright and use, re-use, publish, and republish photographic portraits or pictures of the Minor or in which the Minor may be included intact or in part, composite or distorted in character or form, without restriction as to changes or transformations in conjunction with my own or a fictitious name, or reproduction hereof in color or otherwise, made through any and all media now or hereafter known for illustration, art, promotion, advertising, trade, or any other purpose whatsoever.

I hereby warrant and certify that I am the parent or guardian of the minor, and do hereby give my consent, without reservation, to the foregoing on behalf of the minor.

Student/ Guardian signature: \_\_\_\_\_ DATE \_\_\_\_\_

We use 3 methods of contacting you to deliver information regarding our program and activities we feel you will value. We do not share any of your contact information with others; we will always respect your privacy. Please number your order of preference for receiving our information. This is our current preference:

- 1. Email
- 2. Text
- 3. Phone

Please fill out registration form, make checks payable to South Coast Karate and mail to:  
37 Six Flags Circle Buellton, CA 93427.  
SouthCoastKarate.com  
805 687-5001