



CRCA JEET KUNE DO Seminar Participation Waiver
Saturday, June 30th & Sunday, July 1st, 2007

I understand and am aware that martial arts techniques and martial arts training, including the use of training equipment, is a potentially hazardous activity. I also understand that martial arts activities involve a risk of injury and even death. I am voluntarily participating in these activities and using the training equipment with knowledge of dangers involved. Therefore, I waive all claims against Close Range Combat Academy, the instructor(s), and any participants of this Martial Arts Class individually or otherwise for any claims for injuries that I might sustain.

Name: _____ Age: _____
(Please Print)

Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____ E-mail: _____

(Signature of Participant)

(Date)