



AGREEMENT AND RELEASE FROM LIABILITY

1. **Voluntary participation.** I, _____, acknowledge that I have voluntarily
(print name)
applied, or have voluntarily allowed my child _____ to apply, to participate in
(print child's name)

kendo instruction and training at a dojo or club which is affiliated with the Southeastern United States Kendo Federation (hereinafter, any and all affiliated dojo or clubs, and the members and officers of the Southeastern United States Kendo Federation board of directors, are referred to as "SEUSKF").

2. **Assumption of Risk.** I am aware that participation in kendo, as in any sport or physical activity, may cause physical injury, damage to property, and, in rare cases, even death. I am voluntarily participating, or allowing my child to participate, in this activity with knowledge of the danger involved, hereby agree to accept any and all risks of injury, damage, and/or death, and verify this statement by placing my initials here. _____.

3. **Release.** As consideration for being permitted by SEUSKF to participate in these activities and use related facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against, sue, or attack the property of the SEUSKF on account of injury, damage, or death resulting from the negligence or other acts, however caused, by any employee, agent, or contractor of SEUSKF as a result of my, or my child's participation in kendo. I hereby release SEUSKF from all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, and legal representatives now have or may hereinafter have for injury, damage or death resulting from my, or my child's, participation in kendo.

4. **Knowing and Voluntary Execution.** I have carefully read this release and fully understand its contents. I am aware that this is a release of liability and a contract between SEUSKF and me and sign it of my own free will.

Executed on [date] _____ at [city] _____, [state] Georgia.

Signature of participant, or if participant is a minor, signature of participant's parent or legal guardian *Print name*

DECLARATION OF WITNESS

I certify that _____ [above participant/parent/legal guardian of participant] acknowledged in my presence that he/she read and fully understood the meaning and consequences of the above release, and signed it in my presence.

Executed on [date] _____ at [city] _____, [state] Georgia.

Signature of witness

Print name