

Homann Karate Dō

Nerf War Birthday Party



Participant Form

Parents please fill out this form and have your child bring this form to the nerf war party to be allowed to participate.

Phone: 219-661-0085
HKDCHAMPIONS.COM
Facebook: Homann Karate Do Inc.
1245 East North St. Crown Point, IN 46307



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Participant's Name: _____
Emergency Phone #: _____ Contact Name: _____
Address: _____ City: _____ Zip Code _____
Attending (B-day Friend's Name) _____ birthday party.

I freely assume all such risks both known and unknown and assume full responsibility for my participation. I hereby for myself and my heirs do hereby fully and forever release, discharge, and agree to hold harmless Homann Karate Do and its instructor Brett Homann and other instructors, and his successors and assigns, the owners and lessees of the premise on which sanctioned by Homann Karate Do, of any and all liability for injury, disability, or death I may sustain by the way of my traveling to or from, participating in or other direct or indirect involvement in said nerf war party event I have entered. In addition, I hereby for now and forever, accept any and all responsibilities for any actions in conjunction with said event and the traveling to or from or participation in said event. I agree to fully comply with all the rules. HKD reserves the right to remove me from participation for failing to follow rules, without refund. Finally, I agree to allow, without compensation, the unrestricted use of any photographs, films, or video recording of myself taken during the event for advertisement purposes. I certify that I am the parent or guardian with legal responsibility for the below signed player and agree to his/her release of liability waiver.

Participant's Signature: _____
Parent/Guardian's Signature: _____
Date: _____

WAIVER OF LIABILITY

Participant's Name: _____
Emergency Phone #: _____ Contact Name: _____
Address: _____ City: _____ Zip Code _____
Attending (B-day Friend's Name) _____ birthday party.

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