



ISSHINRYU KARATE CLASS FOR CHILDREN

Instructor: Mohamed Cassim

Liability Release Form

Name: _____

Address: _____

Parent(s) or Guardian(s): _____

I (We) give permission for _____
to attend and participate in the Isshinryu Karate class.

I (We) assume all risk and hazard incidental to the conduct of the activities and transportation to and from the above activities. I (We) do hereby release, absolve, indemnify, and hold harmless Mohamed Cassim (instructor) and the organizers from any and all loss, injury, or other damage to me (us) on the above named child/youth signing up for the Isshinryu Karate class. In case of injury to my child/youth, I (We) hereby waive all claims against Mohamed Cassim (instructor) and the organizers of the Isshinryu Karate class. I (We) likewise release from responsibility any person(s) transporting our child/youth to and from the activity.

Signature of Parent(s) / Guardian(s): _____

Date: _____