

TERMS OF ENROLLMENT AND RELEASE OF LIABILITY

This is a legally binding agreement between the applicant (you) and Pittsburgh Martial Arts & Boxing Academy (formerly Martial Arts Academy of Pittsburgh, East Pittsburgh Boxing & Kickboxing Club), the management, the owners, the property owners, the staff, volunteers and/or other assigned personnel, herein after collectively known as PMA&BA.

I, _____, hereby agree to the following terms. Printed Name of Applicant.

- 1. I understand that PMA&BA may at any time for any reason refuse and/or revoke my membership.
2. I understand that the training for which I am enrolling may be physically and/or mentally strenuous and may involve intentional and/or accidental contact. I voluntarily assume full risk and responsibility of injury, up to and including death.
3. I agree to never use the training provided by PMA&BA in a way that violates local, state and/or federal law or in a way that is unsafe.
4. I understand that pictures and/or videos of classes at PMA&BA will be taken for promotional use and that I may appear in those pictures and/or videos. I understand that I will not be compensated for such.
5. In the event of a medical emergency that surpasses the capabilities of PMA&BA's staff, I authorize PMA&BA to obtain qualified medical assistance and I agree that PMA&BA is not liable for such occurrence.
6. By enrolling in training at PMA&BA, I am representing that I have no condition or illness that would make me more susceptible to injury than what is considered normal. I agree to notify PMA&BA and discontinue training until cleared by a doctor if this changes.
7. I have received no warranties as to the effectiveness of any PMA&BA program.
8. I understand that this is a release of liability and that I am waiving certain rights. I do so willingly.
9. I understand that this release of liability is meant to be as broad as allowed by law and that if any part is found invalid, the remaining will be legally binding.
10. I agree that this release of liability is legally binding upon my relatives, next of kin, representatives, insurance company and any other third party. I agree that they will not be able to make claim against anyone for any event arising from or connected to my membership in a PMA&BA program.

Signature of Applicant. Date

Signature of Witness Date

The above party must be 18 years of age or older. In the event of a minor enrolling at PMA&BA, this release of liability must be completed by a parent / guardian before enrollment is granted.