Date: / /

BUTOKUDEN DOJO APPLICATION FORM

APPLICANT INFORMATION (PLEASE PRINT)

[ ] Kendo [ ] Karate [ ] Aikido [ ] Jodo [ ] Naginata [ ] Yoga [ ] Ikebana [ ] Iaido [ ] Other ( )

Student Name: (Last) (First)			Occupation:
Date of Birth:	Email:		
Home Address:			Mobile Phone:
City:	State:	ZIP Code:	Driver's License:
Martial Arts Experience: Year / Month	Type:		Rank: Date obtained:
Parent/Guardian (if Under 18): (Last) (First)			Mobile Phone:

How did you hear from us? [ ] Website [ ] Google [ ] Yahoo [ ] Yelp [ ] Newspaper [ ] Flyer [ ] Friend (Who?)

BILLING INFORMATION

Billing Info (Same as above [ ]): (Last) (First)			
Address:	City:	State:	ZIP Code:

PHYSICAL INFORMATION

Health Insurance Carrier:		Policy #:
Doctor's Name:	Phone #:	Are you in good health? [ ] Yes [ ] No
Emergency Contact:	Phone #:	Relationship:
Any physical condition we should be aware of?		

LIABILITY WAIVER AND RELEASE

I, undersigned, do hereby voluntarily submit my application for admission to BUTOKUDEN Martial Arts Training Center for attendance and participation in lessons, activities and group classes at 1581 Browning, Irvine, CA 92606. Hereby I assume full responsibility for any and all damages, injuries or losses that I may sustain or incur, if any while attending or participating. I waive all claims against instructors or fellow students of said class, or the owner of the school, or the school, or BUTOKUDEN, Inc. (DBA BUTOKUDEN Martial Arts Training Center), or the owner of the building for any claims for any injuries that I may sustain. I do hereby consent that any pictures furnished by me or my child any pictures taken of me or my child in connection with said school can be used for publicity or promotion. And, I waive compensation in regard thereto. I certify that the above information is correct and accurate to the best of my knowledge. I also will sign an agreement called "RELEASE FROM LIABILITY, WAIVER OF ALL CLAIMS AND INDEMNITY AGREEMENT" and "RELEASE FROM LIABILITY, WAIVER OF ALL CLAIMS AND INDEMNITY AGREEMENT (COVID-19)" before being admitted to the BUTOKUDEN Martial Arts Training Center. Admission to the Center is further conditioned on my signing a Release Agreement.

SIGNATURES

WARNING - BY SIGNING THIS AGREEMENT, YOU ARE WAIVING ALL RIGHT TO SUE BUTOKUDEN, INC. DBA "BUTOKUDEN MARTIAL ARTS TRAINING CENTER" (hereinafter "BUTOKUDEN"), ITS OWNERS, DIRECTORS, OFFICERS, INSTRUCTORS, VOLUNTEERS, COACHES, MEMBERS, AGENTS, AFFILIATES, GUESTS AND/OR ANY RELATED PARTY THERETO (COLLECTIVELY AND INDIVIDUALLY "RELEASEES") FOR DAMAGES THAT YOU AND YOUR CHILD MAY SUFFER WHILE YOUR CHILD IS A STUDENT AT BUTOKUDEN. NOTE THAT THIS RELEASES ALL CLAIMS AGAINST THE RELEASEES WHICH MAY RESULT EVEN FROM THEIR OWN NEGLIGENCE. **RULES: BUTOKUDEN may terminate your membership at any time with or without cause and without prior notice. You are expected to observe all rules and instructions while participating in BUTOKUDEN activities. Unruly behavior, failure to follow instructions, lack of discipline, damage to property, disrespect to instructors and fellow students are grounds for immediate termination of membership.**

Signature:	Name:	Date:
Signature of parent or legal guardian:	Name:	Date:

OFFICE USE

Admitted Date:	Approved by:	
Received copy of: [ ] Release Waiver* [ ] Driver's License [ ] Insurance (*required)		
Payment method: [ ] Check [ ] Visa [ ] Master [ ] Amex [ ] Other		
Credit Card number:	Exp: /	

Comments	Registration Fee	$
	Monthly Fee	$
	Federation Fee	$
	Others	$
	Sub Total	$
	Total	$

Copyright © BUTOKUDEN, Inc.