

JEET KUNE DO UNLIMITED

High Performance Mixed Martial Arts

Association

808-864-1620

Membership Application

Date: __/__/__

Basic Program (\$35/\$45*/year) _____

Preferred Program (\$200/\$220*/year) _____

High Performance Program (\$75/\$85**/\$95*/month) _____

**International price ** Canada*

Name - _____

Address _____

City _____ ST _____ Zip _____

Country _____ E-mail address _____

Home() _____ Work() _____

Date of Birth _____ Shirt size _____

Occupation _____

List Martial Arts experience: _____

Explain your goals in the Martial Arts: _____

Please make check or money order in \$US drawn from a US based bank account payable to JKD Unlimited. Or use credit card! Thank You!

**Burton Richardson's
Jeet Kune Do Unlimited
High Performance Mixed Martial Arts
Academy**

4224 Waiialae Ave #5-128
Honolulu, HI 96816
(808) 864 1620

Liability Release

Date ____/____/____

Student's information (please print clearly)

Last Name: _____ First: _____ D.O.B: _____

Street address: _____ Apt #: _____ City: _____

Zip Code: _____ Home #: () _____ Bus #: () _____

Academy Rules and Regulations. As a student, I must faithfully comply with all the rules and safety regulations of the Academy. Furthermore I am physically and mentally fit to participate in a course of martial art instruction and free of any communicable/infectious disease(s) (Initial _____).

Medical Release: In the event of an emergency, Student hereby authorizes transportation and licensed personnel to perform any accepted medical procedures on the Student deemed necessary or advisable, and agrees to bear the expense of such transportation or procedures (Initial _____).

Release of Liability: Martial arts instruction and self defense courses offered by Jeet Kune Do Unlimited, and its owners and employees (collectively Academy), will involve sparring and physical contact with other individuals, which may result in personal injury. Other programs offered by the Academy, including stick fighting and street grappling, also present a risk of personal injury to the participant. By signing below I am acknowledging my intent to release, waive, and discharge the Academy from any claim or liability for injury to my person or my child/children hereafter occurring at or around the Academy from any cause, whether or not such injury results from the active or passive negligence of the Academy. Accordingly, I, myself, and children, and for my and their successors, personal representatives, and assigns, hereby (I) release and waive any claims and causes of action against the Academy for personal injury, loss and /or consequential damage to me or my children resulting from the future passive or active negligence of the Academy in the operation, management, or supervision of the Academy and (I) agree to indemnify, defend, and hold the Academy free and harmless from any cost, loss, or liability arising out of any injury to myself or my children in or around the Academy proximity resulting from the negligence of the Academy. I further understand that **I am not required to do any drill or exercise**. I take responsibility for any training that I undertake.

Student's signature or parent or guardian's signature (for minors)

Accepted by