



Edmonds Kendo Club

Liability Waiver and Release Agreement

I understand that participation in kendo and related activities involves inherent risks, including but not limited to paralysis, brain injury, loss of vision or limb function, permanent scarring, disability, and death. I voluntarily assume and accept all such risks associated with participation. I affirm that I possess the physical ability and conditioning necessary to participate safely in these activities.

By signing this waiver and intending to be legally bound, I hereby waive, release, and discharge any and all claims, rights, or causes of action for personal injury, property damage, or loss that I, my heirs, executors, administrators, or assigns may have against Edmonds Kendo Club (hereinafter referred to as the "EKC") and the homeowners of the practice location arising out of or related to participation in kendo or any related activities held at 18322 17th Place West, Lynnwood, Washington 98037-4903. This release applies to injuries, damages, or losses resulting from my own actions, the actions of other participants, or ordinary negligence, to the fullest extent permitted by law.

Emergency Medical Treatment Authorization - In the event of an injury, accident, or medical emergency, I authorize EKC staff, instructors, representatives or others to obtain emergency medical treatment for myself or the minor participant if I cannot be reached immediately. I understand that I am financially responsible for any medical care or treatment provided.

Emergency Contact Name: _____, Relationship: _____, Phone: _____

Photo and Video Release - I grant permission to EKC to photograph and/or record videos of myself or the minor participant during club activities, practices, demonstrations, or events. I understand that these images or recordings may be used for educational, promotional, or informational purposes, including on the club's website, social media, printed materials, or other club-related publications, without compensation. If I do not wish for photographs or video recordings to be used, I will notify EKC in writing.

I HAVE READ AND UNDERSTAND THIS DOCUMENT, RECOGNIZE IT AS A LEGALLY BINDING AGREEMENT, AND SIGN IT VOLUNTARILY. I FURTHER AGREE TO FOLLOW ALL CLUB RULES, POLICIES, AND INSTRUCTIONS.

Print Name of Participant

Signature of Participant or Parent/Guardian

Print Name of Participant

Signature of Participant or Parent/Guardian

Print Name of Participant

Signature of Participant or Parent/Guardian

Print Name of Participant

Signature of Participant or Parent/Guardian

Date: _____