

# Top Tier Martial Arts

## LIABILITY RELEASE

Student's Name: \_\_\_\_\_

Date: \_\_\_\_\_

Class Attending: \_\_\_\_\_

**Member** (if a minor, including their parent or guardian) further acknowledges the existence of some risk of personal injury in participating in said prescribed course of instruction and that they are assuming this risk without liability to **Top Tier Martial Arts** by executing this agreement and participating in said prescribed course of instruction, Member hereby agrees to release **Top Tier Martial Arts** its owners, agents, employees, and other members from all liability in said prescribed course of instruction. **You must give us a one month notice if you are stopping classes. If not, you will be responsible for that payment.**

**I give Top Tier Martial Arts permission to take/use pictures of myself/my child for their professional social media and website.**

I have read, understood, and agree to all conditions set forth in the above Agreement. In witness thereof, the parties hereto have signed this Agreement of the above date. **Member** acknowledges receipt of this Agreement.

**Member:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**If Minor:**

Parents Name: \_\_\_\_\_

Signature: \_\_\_\_\_