

# Registration and Permission Form

## **“Back to School” 1-Night Self-Defense & Physical Empowerment Class**

**Wednesday, August 8th  
7:00pm – 9:00pm  
Callahan’s Karate Studio, Bedford**

***Please email PDF of form to [jennifersbuckley1@gmail.com](mailto:jennifersbuckley1@gmail.com) or text photo to 617.519.7751  
by Friday, August 3<sup>rd</sup>.***

I the undersigned student aged 18 or over, parent or lawful guardian of

Student name: \_\_\_\_\_

a minor, do hereby consent to his/her participation in the above named activity which is a voluntary program offered by Callahan’s Karate and GrooveWrX do forever RELEASE, acquit, discharge, and covenant to hold harmless Callahan’s Karate and GrooveWrX, its officers, agents, employees and attorneys from any and all actions, causes of action, (and) claims on account of, or in any way growing out of directly or indirectly, all known and unknown personal injuries or property damage which \_\_\_\_\_ (student) and/or I may now or hereafter have as the parent/guardian of said minor, and also all claims or rights of action for damages which said minor has or hereafter may acquire, either before or after he/she has reached his/her majority resulting from his/her participation in the aforementioned activity sponsored by Callahan’s Karate and GrooveWrX.

\_\_\_\_\_  
(Signature of Parent/Guardian or Student 18 Years or Older)

\_\_\_\_\_  
Date

Emergency contact name and phone:

\_\_\_\_\_

Any known allergies or issues we should be aware of:

\_\_\_\_\_