ADULT RELEASE OF LIABILITY, ASSUMPTION OF RISK & MEDIA CONSENT

1. ACKNOWLEDGMENT & ASSUMPTION OF RISK

I understand that participation in kickboxing training, including punching, kicking, pad and heavy-bag work, conditioning, partner drills, and controlled sparring where offered, involves inherent risks of physical injury. These risks may include bruises, sprains, strains, fractures, dental injuries, concussion or other head injury, and other serious injuries. I voluntarily assume all risks associated with participation.

2. VOLUNTARY PARTICIPATION & HEALTH CONFIRMATION

I confirm that I am voluntarily participating and am physically and medically able to engage in kickboxing training. I understand it is my responsibility to consult a physician if I have concerns.

3. RELEASE & WAIVER OF LIABILITY

To the fullest extent permitted by law, I release and waive all claims against ANIKA KICKBOXING, its owners, instructors, staff, volunteers, and representatives for any injury, loss, or damage arising from participation, including those resulting from ordinary negligence.

4. INDEMNIFICATION

I agree to indemnify and hold harmless ANIKA KICKBOXING from any claims or legal expenses arising from my participation in training or events.

5. MEDICAL AUTHORIZATION

In an emergency, I authorize ANIKA KICKBOXING to obtain emergency medical treatment for me if necessary. I accept full responsibility for any related costs.

6. MEDIA, PHOTO & VIDEO RELEASE

I grant permission for photographs or video recordings of me to be used for promotional, educational, or instructional purposes. No compensation will be provided. Initial here to opt out: _____

7. GOVERNING LAW

This Agreement shall be governed by and interpreted in accordance with the laws of the Province of New Brunswick, Canada.

8. FULL UNDERSTANDING & CONSENT

I confirm that I have read and fully understand this Agreement and am signing it freely and voluntarily.

Participant Name: _____

Signature: _____

Date: _____

Phone: _____

Email: _____