TRIAL CLASS / INTRODUCTORY SESSION WAIVER

(Minor Participant)

I understand that participation in a trial or introductory kickboxing class involves physical activity and inherent risks, including injury from punching, kicking, pad and heavy-bag work, conditioning, partner drills, and controlled sparring where offered. Possible injuries include bruises, sprains, strains, fractures, dental injuries, concussion or other head injury, and other serious injuries.

I voluntarily permit my child to participate in a trial class at ANIKA KICKBOXING and confirm that my child is physically and medically able to do so.

To the fullest extent permitted by law, I release and waive all claims against ANIKA KICKBOXING, its owners, instructors, staff, and representatives for injuries or damages arising from participation, including those caused by ordinary negligence.

In an emergency where I cannot be reached, I authorize ANIKA KICKBOXING to obtain emergency medical treatment for my child at my expense.

Participant Name: _____

Date of Birth: _____

Parent/Guardian Name: _____

Signature: _____

Date: _____