

OPEN DOOR MARTIAL ARTS CENTER LLC

525 Jefferson Street, Sturgeon Bay, WI

PARTICIPANT WAIVER, RELEASE OF LIABILITY, AND ASSUMPTION OF RISK

This Waiver, Release of Liability, and Assumption of Risk Agreement ("Agreement") is entered into by the undersigned participant or, in the case of a minor, by the participant's parent or legal guardian, and Open Door Martial Arts Center LLC, a Wisconsin limited liability company located at 525 Jefferson Street, Sturgeon Bay, Wisconsin ("the School").

Please read this Agreement carefully and in its entirety before signing. By signing below, you acknowledge that you have read, understood, and voluntarily agree to all terms contained herein.

1. Description of Activity

Martial arts training, including but not limited to Taekwondo, kickboxing, fitness classes, and any related activities offered by the School (collectively, "Activities"), involves physical exertion and contact that carries inherent risks of injury. Participation in the Activities is entirely voluntary.

2. Assumption of Risk

Participant (and parent/guardian if participant is a minor) acknowledges and understands that the Activities involve risks, dangers, and hazards, including but not limited to:

1. Physical contact with other participants and instructors;
2. Bruises, sprains, strains, fractures, or other orthopedic injuries;
3. Cuts, abrasions, or other soft tissue injuries;
4. Cardiovascular stress and physical exhaustion;
5. Injuries caused by equipment, flooring, or facilities;
6. In rare cases, serious injury or death.

Participant voluntarily and knowingly assumes all risks associated with participation in the Activities, whether or not such risks are described above.

3. Release of Liability

In consideration of being permitted to participate in the Activities, participant (and parent/guardian if participant is a minor) hereby releases, waives, discharges, and agrees not to sue Open Door Martial Arts Center LLC, its members, managers, instructors, employees, agents, successors, and assigns (collectively, "Released Parties") from any and all claims, demands, losses, damages, costs, and causes of action arising out of or related to participation in the Activities, including claims arising from the negligence of the Released Parties, to the fullest extent permitted by applicable law.

This release applies to injuries and damages whether known or unknown, foreseen or unforeseen, which may occur before, during, or after participation in the Activities.

4. Indemnification

Participant agrees to indemnify, defend, and hold harmless the Released Parties from and against any and all claims, losses, damages, costs, and expenses (including reasonable attorneys' fees) arising out of or related to participant's participation in the Activities or any breach of this Agreement.

5. Medical Authorization

In the event of an emergency, participant authorizes the School and its representatives to obtain or render emergency medical treatment on participant's behalf. Participant acknowledges that the School does not provide medical care and that any emergency treatment costs are the sole responsibility of the participant or parent/guardian.

6. Health Representation

Participant represents that they are in good physical health and have no medical condition that would prevent participation in the Activities, or if such a condition exists, that a licensed physician has approved participation. Participant agrees to inform the School of any medical condition, injury, or physical limitation that may affect safe participation.

7. Code of Conduct

Participant agrees to follow all rules and instructions provided by School instructors, to treat fellow participants and staff with courtesy and respect, and to conduct themselves in accordance with the traditions and values of martial arts training. The School reserves the right to dismiss any participant whose conduct is deemed unsafe or disrespectful, without refund.

8. Photography and Media

Participant grants permission to the School to photograph or record participant during the Activities and to use such images or recordings for promotional or educational purposes, including on the School's website and social media channels, without compensation. If you do not consent, check the box below:

I do NOT consent to photography or recording of the participant named above.

9. Severability and Governing Law

If any provision of this Agreement is found to be unenforceable, the remaining provisions shall remain in full force and effect. This Agreement shall be governed by the laws of the State of Wisconsin.

10. Acknowledgment

By signing below, I acknowledge that I have read this Agreement in full, that I understand its terms, and that I agree to be bound by them freely and voluntarily. I acknowledge that this is a legally binding document.

SECTION A — ADULT PARTICIPANT (18 years or older)

Complete this section if the participant is 18 years of age or older.

_____ *Full Legal Name (print)*

_____ *Date of Birth*

_____ *Address*

_____ *Phone Number*

_____ *Emergency Contact Name & Phone*

_____ *Signature*

Date

SECTION B — MINOR PARTICIPANT (under 18 years of age)

Complete this section if the participant is under 18. Must be signed by a parent or legal guardian.

Participant's Full Name (print)

Participant's Date of Birth

Parent/Guardian Full Legal Name (print)

Relationship to Participant

Address

Phone Number

Emergency Contact Name & Phone

Parent/Guardian Signature

Date

FOR SCHOOL USE ONLY — Date received: _____ Staff initials: _____ File: _____