

SPAR WARS

August 12, 2018

Participants Name _____ Phone # () _____ - _____
Address _____ City _____ State _____ ZIP _____
Participant's Age _____ Participant's Instructor _____
Participant's Rank/Belt Color _____ Degree 1st 2nd 3rd 4th 5th 6th
Participant's Class Location _____
Credit Card #: _____ Expiration Date: _____
Security Code: _____ Billing Zip Code: _____

Total Paid: \$ _____

\$25 dollars before 5pm on 8/3, \$30 dollars before 5 pm on 8/10, \$35 dollars at the door

NO REFUNDS - NO EXCEPTIONS

Champions in Motion liability release (please read carefully) Signature Required

I, the undersigned parent/legal guardian of the students listed above, do hereby release Champions in Motion, Inc., and any sponsoring organization, facilities, instructors, parent helpers and/or any other party involved in the cheer/self-defense (karate)/dance program in which the student is enrolled for any liability arising from any accident or injury suffered by the student during the student's participation in the program. By executing this release, I am acknowledging the risks involved in the participation of the various programs at different levels and understand that while steps will be taken to prevent injury, accidents can occur. The undersigned shall indemnify and hold Champions in Motion, Inc., and any sponsoring organizations, facilities, instructors, parent helpers and/or any other party involved shall not be responsible for lost, stolen, damaged or missing equipment, merchandise and /or personal belongings. I understand my child may be photographed. CIM reserves the right to refuse service to any customer for any reason.

Signed _____

Date _____

