

**EKKA/MMA MESSIAH MARTIAL ARTS**  
**WARNING, WAIVER, RELEASE OF LIABILITY, ASSUMPTION OF RISK THIS**  
**AGREEMENT MUST BE SIGNED BY ALL PERSONS WHO WISH TO PARTICIPATE IN**  
**ANY**

**EKKA/MMA MESSIAH MARTIAL ARTS CLASS, EVENT, OR ACTIVITY.**

In consideration of being allowed to participate in any way in the classes, events, and/or activities of EKKA/MMA Messiah Martial Arts.

I, Participants Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Name  
(of minor child participant) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

1. Recognize and understand that martial arts training is an activity that involves physical contact and that my participation might result in serious injury, including permanent disability or even death, and severe social and economic loss.
2. Recognize and understand that such risk may be due to not only my own actions, but also the action, inaction or negligence of others, the regulations of participation, or the conditions of the premises, or of any of the equipment used.
3. Recognize that there may be other risks that are not known to me or to others or not reasonably foreseeable at this time.
4. Agree to inspect the facilities, equipment and pairings prior to participation. I will immediately inform an instructor if I believe that anything is unsafe or beyond my capability and refuse to participate.
5. Assume all of the foregoing risks and accept personal responsibility for any damages that may result from injury, permanent disability or death.
6. Enter martial arts training and/or competition entirely of my own free will and understand the importance of following the rules of training and competition.
7. I certify that I am in good physical condition, and have no disease, injury or other condition that would impair my performance or physical and mental well-being during intense training – practice and/or competition.
8. Grant permission in case of injury to have a doctor, nurse, athletic training or other emergency medical personnel provide me with medical assistance or treatment for such injury.
9. Release, waive, discharge and covenant not to sue, EKKA/MMA Messiah Martial Arts, its affiliated organizations and governing bodies, their officers, instructors and personnel, other members of the organizations, participants, supervisors, coaches, sponsoring organizations or

their agents, and if applicable, owners and leasers of the premises from any and all liability to the undersigned, his or her heirs and next of kin for any and all claims, demands, losses and damages which may be sustained and suffered on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

I HAVE READ THE ABOVE WARNING, WAIVER, RELEASE, AND ASSUMPTION OF RISK. I FULLY UNDERSTAND ITS CONTENTS, AND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I HEARBY SIGN IT VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY.

Participant's Printed Name \_\_\_\_\_  
(or parent or guardian if under 18)

Signature \_\_\_\_\_

Date \_\_\_\_\_

