EDMONTON YUDANSHAKAI JUDO SOCIETY ADULT(18 years and older)

NAME:.....CLUB.....

YEAR BORN.....

NOTICE: This is a legal document which must be properly completed and signed or your entry will not be accepted. PLEASE READ CAREFULLY. It affects your rights. If-you do not understand it, obtain legal advice before signing.

RELEASE, INDEMNITY, WARRANTY, AND -ASSUMPTION OF RISK

IN CONSIDERATION OF the acceptance of my entry to compete and/or my being permitted to participate in the EYJS Monthly (hereinafter referred to as "this event'), I hereby release, remise and forever discharge, and agree to indemnify and save harmless The Alberta Kodokan Black Belt Association, Edmonton Yudanshakai Judo Society, Tolide Judo Club, the Dow Centennial Center, the organizers of this event, their respective officers, executives, directors, officials, agents, servants and representatives (hereinafter referred to as " the Releasees") from and against all claims, actions, costs, expenses and demands in respect of death, injury, loss or damage to my person or property, however caused, arising out of or in connection with my competing or participating in this event and not withstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of common duty of care as an occupier of premises, or otherwise, of or by the Releasees or any of them.

1 agree to assume all risks, both known and unknown, and all consequences thereof, arising out of or in connection with my competing or participating in this event. I agree to adhere to all rules, regulations and conditions of this event.

I CERTIFY THAT:

- 1. I am in good physical condition and 1 have no injury, disease or disability nor have I injected or ingested anything that would impair my performance or physical condition or increase the likelihood of injury in competing or participating in this event.
- 2. No physician, nurse, therapist, trainer, coach, manager or other person has advised me not to compete or participate in a body contact sport or this event.
- 3. I am familiar with the sport of Judo and the nature of a Judo contest. I am aware that there is a high risk of injury by the very nature of the sport.

THIS DOCUMENT SHALL BE BINDING UPON MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, ASSIGNS AND PERSONAL REPRESENTATIVES.

I have read this document and I understand it fully.

PRINT NAME:

EYJS monthly senior waiver form Revison Date: November 23/04