



# LADIES SELF DEFENSE

In a supportive and positive environment you will learn practical skills to help recognize and respond to potential threats with confidence. While our regular karate program develops full proficiency and a strong mental component there are some basic principles and techniques that can be taught in a short period of time. Regardless of your starting point, though, this condensed course will teach you essential tools for protecting yourself effectively and efficiently.



1:00 -4:00 PM

## Desa School of Karate

3 Rowland Crescent, St. Albert

Non Members .....



Members .....



Group Rates Available .....



NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_ BEST PHONE NUMBER: \_\_\_\_\_

I'M REGISTERING FOR:  ONE PERSON  WITH A GROUP Group Name: \_\_\_\_\_

AMOUNT PAID: \$ \_\_\_\_\_  CHEQUE  CASH / TRANSFER

Cheques payable to: MEM KARATE eTransfer to: [desakarate@shaw.ca](mailto:desakarate@shaw.ca) (If eTransferring please indicate self defense course in the notes section).

### WAIVER

I acknowledge that karate, related martial arts and self defense are full body contact activities and as a consequence, there is a risk of physical injury while participating. I further acknowledge having read this Liability Release carefully and confirm that I understand its terms and agree to be bound by it. In consideration of M.E.M. Karate Ltd. accepting this application, I, the undersigned, for myself, my heirs, executors, administrators and assigns release M.E.M. Karate Ltd., its servants agents directors, and employee from any claims, demands, damages, person or property while attending at or participating in a karate, self defence, martial art or related activity notwithstanding any such loss, injury or damage may have arisen by reason of the negligence of M.E.M. Karate Ltd., its servants, agents, or employees. Without limiting the generality of the foregoing, I further release any recourses which may now or hereafter have resulting from any decision of M.E.M. Karate Ltd.

Student or Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Witness: \_\_\_\_\_