



LADIES SELF DEFENSE

A practical workshop introducing a variety of techniques that could help you in a self defense situation


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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 (When transferring 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: _____