

# Martial Arts Competition Injury Waiver

Participant Name

Date of Birth

I, the undersigned, acknowledge that participation in this martial arts competition involves inherent risks of physical injury. I voluntarily assume all risks associated with participation, including but not limited to, falls, contact with other participants, and all other foreseeable and unforeseeable risks.

I hereby waive, release, and discharge the organizers, sponsors, instructors, referees, volunteers, and all persons associated with this event from any and all liability for injury, loss, or damage to person or property incurred while participating in this event.

I certify that I am physically fit and have not been advised otherwise by a qualified medical professional. I agree to abide by the rules of the event.

If the participant is under 18 years of age, I certify that I am the parent or legal guardian and consent to his/her participation in this event.

Participant Signature

Date

Parent/Guardian Signature (if under 18)

Date