

ROY HARRIS REGISTRATION FORM

MAY 29, 2005

NAME:

ADDRESS:

POSTAL CODE:

CITY:

PROVINCE:

PHONE NUMBER:

EMAIL:

MARTIAL ARTS SCHOOL REPRESENTING:

PAYMENT: \$50.00

PAID BY:

DATE:

LOCATION OF SEMINAR: BDB Martial Arts
ADDRESS: #1, 3300- 14 Ave NE, Calgary, AB T2A 6J4
TIME: 12:00pm – 5:00pm on Sunday
COST: \$50.00

PAYMENT IN ADVANCE OR DAY OF: CASH, VISA, CHEQUE, DEBIT, MC or AMEX

(Please make cheques payable to National Brazilian Jiu-Jitsu)

FOR MORE INFORMATION OR TO SIGN UP CONTACT:

BDB MARTIAL ARTS
BRIAN BIRD OR SHEILA BRADISH

220-1426

DISCLAIMER / WAIVER

I, the undersigned, hereby understand that Brazilian Jiu-Jitsu is a contact sport and that there is a risk to myself that physical injury may occur from time to time as a result of training instruction or taking part in the activities of Brazilian Jiu-Jitsu. Notwithstanding the aforementioned risk of injury the undersigned acknowledges and accepts the risks involved in the sport of Brazilian Jiu-Jitsu and absolves National Brazilian Jiu-Jitsu Inc. and it's instructors, members, agents and employees of any and all liability while taking part in any activity programs on the premises whether or not the program is supervised by any of the above aforementioned individuals.

DATE: SIGNATURE:

SIGNATURE OF PARENT OR GUARDIAN: