## **Release and Waiver**

Please read and complete all sections.
In consideration of the acceptance of this application into the Burlington Kendo Club Dojo events, I
I further state that I am in proper physical condition to participate in Kendo classes and events, and am aware that participation could, in some circumstance, possibly result in physical injury.
Please print:
Applicants name:
Date of birth: (yr/mo/dy)
Applicants address:
Applicants signature:
Parent signature (If applicant under 18):
Dated:

burlingtonkendo@gmail.com