



**To: KALI ESKRIMA ARNIS TAPADO – CLASSICAL MODERN SYSTEM**

I \_\_\_\_\_ (print name) acknowledge that I am applying to obtain Instruction in this Seminar and Training of Filipino Martial Arts which will involve strenuous exercise and personal body contact. I hereby understand that there is an inherent risk of physical and emotional injuries.

I hereby confirm that I shall assume responsibility and risk of all injuries and do hereby release KEAT - CMS, its Instructors and members from any and all Liability due to injuries suffered by me or caused by a third party arising out of Activities involving in the Seminar and training of Filipino Martial arts and relating activities of the Kalli Eskrima Arnis Tapado – Classical Modern System.

I confirm that I am physically fit for the Seminar / Training in Filipino Martial Arts Kali Eskrima Arnis Tapado – Classical Modern System.

Name : \_\_\_\_\_ ( Parents Signature)

\_\_\_\_\_

Signature: \_\_\_\_\_

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

**(If under 18, must be accompanied by the Signature of the Parents / Guardian)**