



NEW YORK AIKIDO SOCIETY, INC.  
(D/B/A BOND STREET DOJO)

WAIVER, RELEASE OF LIABILITY, ASSUMPTION OF RISK  
AGREEMENT, AND AGREEMENT TO PARTICIPATE

IN CONSIDERATION OF BEING ALLOWED TO PARTICIPATE IN ANY WAY, INCLUDING TRAVEL TO AND FROM THE MARTIAL ARTS PRACTICES, CLINICS, CLASSES, EVENTS AND ACTIVITIES OF THE NEW YORK AIKIDO SOCIETY, INC.

**I HEREBY:**  
(initial)

- \_\_\_\_\_ 1. Understand and agree that prior to participating, I have the right and duty to inspect the mats, equipment and facilities to be used, and if I believe that anything is unsafe or beyond my ability I will immediately advise the instructor or supervisor of such condition(s) and refuse to participate.
- \_\_\_\_\_ 2. Acknowledge and fully understand that I will be voluntarily engaging in activities that involve contact and that might result in serious injury, including permanent disability or death, and severe social or economic losses due to not only my own actions, inactions or negligence, but also to the action, inaction, or negligence of others, or conditions of the premises or of any equipment used. Further, I acknowledge that there may be other risks not known to me or not reasonably foreseeable at this time.
- \_\_\_\_\_ 3. Assume all of the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability, or death.
- \_\_\_\_\_ 4. Release, waive, discharge, and covenant and agree not to sue or make claim against the New York Aikido Society, Inc. or any of its affiliated organizations, their respective agents, officers, directors, instructors, employees, volunteers, sponsors, members, other participants, their parents, guardian(s), supervisors and instructors, and if applicable, owners, lessors, and lessees of any premises used by the New York Aikido Society, Inc. or any of its affiliated organizations, all of whom are hereinafter collectively referred to as "Releasee", from any and all claims, demands, losses, or damages on account of injury, including permanent disability and death or damage to property, caused or alleged to have been caused in whole or in part by the negligence of the Releasee or otherwise.



b o n d s t r e e t d o j o  
new york aikido society  
214 w. 29<sup>th</sup> street  
nyc 10001  
(212) 477.0899

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\_\_\_\_\_ 5. State that I have observed at least two Aikido classes held at the premises of the New York Aikido Society, Inc.

- OR -

\_\_\_\_\_ 6. State that I have practiced Aikido for \_\_\_\_\_ years and have been awarded the rank of \_\_\_\_\_ by Sensei \_\_\_\_\_ of \_\_\_\_\_ prior to requesting permission to participate in the activities of the New York Society, Inc.

\_\_\_\_\_ 7. Parent(s) or legal guardian(s) of minor participants (age 17 and below) additionally state that they have observed at least one New York Aikido Society, Inc. class.

\_\_\_\_\_ 8. Parent(s) or legal guardian(s) of minor participant (age 17 and below) additionally agree that they have instructed and advised the minor participant as to the above warnings and conditions and their ramifications, and that they consent to the minor's participation.

I HAVE CAREFULLY READ THE ABOVE WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT AND KNOWING THIS, I DO SIGN IT VOLUNTARILY. I AGREE TO PARTICIPATE KNOWING THE RISKS AND CONDITIONS INVOLVED AND DO SO ENTIRELY OF MY OWN FREE WILL.

PARTICIPANT: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

PARENT/GUARDIAN: N/A (MUST BE 18 OR OVER TO JOIN) \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: N/A (MUST BE 18 OR OVER TO JOIN) \_\_\_\_\_