

VOYAGE

JIU JITSU

Release of Liability, Waiver of Claims, and Assumption of Risk

I, the undersigned, hereby acknowledge that I am voluntarily participating in Brazilian Jiu Jitsu training and/or activities at Voyage Jiu Jitsu. I understand that martial arts involve physical contact and exertion, and that injuries may occur despite safety precautions.

I acknowledge and agree to the following:

Assumption of Risk: I am fully aware of the risks associated with participating in martial arts training, including but not limited to sprains, strains, dislocations, broken bones, or other injuries. I freely accept and assume all such risks.

Medical Clearance: I affirm that I (or my child) am in good physical health and have no medical condition that would prevent safe participation in classes.

Release of Liability: I waive, release, and discharge Voyage Jiu Jitsu, Voyage Martial Arts, its instructors, staff, affiliates, and landlords from any and all claims, liabilities, demands, or causes of action arising out of or related to any loss, injury, or damage, including death, that may be sustained while participating in any training, competition, or event.

Emergency Medical Care: In the event of an emergency, I authorize Voyage Jiu Jitsu to obtain medical treatment deemed necessary for myself or my child and agree to be financially responsible for any resulting expenses.

Photography & Media Release: I grant permission for Voyage Jiu Jitsu to use photos or video taken during classes or events for promotional and marketing purposes.

Code of Conduct: I agree to abide by the rules and conduct guidelines of Voyage Jiu Jitsu, and understand that failure to do so may result in dismissal from the program without refund.

Name of participant: _____

Parent/Guardian Name if Under 18: _____

Home Address: _____ Apt. # _____

City: _____, State, Michigan, Zip: _____

Signature: _____ Date: _____

Parent/Guardian Signature if under 18: _____

29325 Harper Ave, St Clair Shores, MI 48081