

Parental Permission Slip for U.S. Martial Arts Center Activity and Pick-Up/ Carpool

Please Print Clearly in black or blue ink:

Date: _____

This is to certify that my son and/or daughter: _____

Has my permission to attend and participate in U.S. Martial Arts Center activity including class. I understand that the activity will be supervised by competent adult or U.S. Martial Arts Center Staff Member, and I also understand that my son/daughter will be responsible for all his/her expenses connected with this activity.

I hereby give my permission for my son/daughter to ride in a private car driven by: _____ or another U.S. Martial Arts Center Parent or Adult Student attending this activity or class. If unavailable parent or legal guardian is the only person students will be released to for transportation.

I hereby release the U.S. Martial Arts Center, and all U.S. Martial Arts Center employees and agents and adult leaders from any liability and from any and all claims against them, individually or collectively, for any injuries or losses which might be received during this event or activity, or in traveling to and from such event destinations. I allow U.S. Martial Arts Center staff, parent or adult student to seek medical attention on my son and/or daughter if required.

Time of departure from : _____ : ____:____ AM/ PM

Estimated time of arrival at U.S. Martial Arts Center (HQ / WO / SL) (other: _____): ____:____ AM/ PM

Estimated time of return location: _____ : ____:____ AM/ PM

Parent's/Guardian's Signature: _____

Print Parent's/Guardian's Signature: _____

Phone Number Where You May be Reached During This USMAC Activity: _____

Alternative Phone # Where You May be Reached During This USMAC Activity: _____

Student's Mobile Cell Phone # to Reached During This USMAC Activity: _____

I understand that any misconduct (by U.S. Martial Arts Center Standards) on my part will result in non-participation in current and future activities and that severe misconduct might result in disciplinary action by the U.S. Martial Arts Center. I agree to follow and abide by the safety guidelines, rules and regulations of the U.S. Martial Arts Center.

Student's Signature: _____

Parent's/Guardian's Signature: _____

Print Parent's/Guardian's Name: _____