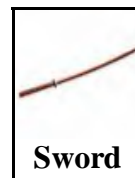


Yeon Oh Kwan WEAPONS SEMINAR

REQUIRED WEAPONS FOR RANK ADVANCEMENT



Date: Sunday, 2/20/2011
Time : 09:00AM - 3:30PM
Fee: \$45

This is a new and very unique training opportunity. We will be covering all required Weapons curriculum during this session.

This is a tremendous chance to learn in this exciting environment.

**South Elgin Martial Arts will be providing Lunch! Pizza from Pizza Hut!
 We will have a 1/2 hour break at 12PM.**

**Please complete and return the bottom portion
 February 20 2011 Weapons Seminar**

Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Emergency Phone#: _____

Martial Art: _____ Rank: _____ **Weapon:** _____

Method of Payment --- Please make checks payable to: Moore Endeavors, Inc.

CASH: _____ CHECK#: _____ AMOUNT: _____ DATE: _____

Debit **G** Credit: Visa **G** MasterCard **G** Discover **G** American Express **G**

Billed Amount \$: _____ Cardholder: _____

Card #: _____ Security Code: _____ Expiration Date: _____

Signature: _____

Warning of Risk, Assumption of Risk, Waiver and Release of Any and All Claims, Emergency Treatment Permission

Moore Endeavors, Inc. (MEI), Academy of Hosinsul & Martial Arts (AHMA), South Elgin Martial Arts (SEMA), and Donald Moore is committed to conducting any and all course(s)/program(s)/activities in a safe manner and holds the safety of any and all participants in high regard. MEI, AHMA, SEMA, and Donald Moore continually strives to reduce such risks and insists that any and all participants follow safety rules and instructions that are designed to protect the participants' safety. However, any and all participants registering for MEI, AHMA, SEMA and Donald Moore course(s)/program(s)/activities must recognize that there is an inherent risk of injury when choosing to participate in such course(s)/program(s)/activities. You are solely responsible for determining if you or your minor child/ward are physically fit and/or adequately skilled for the course(s)/program(s)/activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way or has recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

The course(s)/program(s)/activities are intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any and all of the course(s)/program(s)/activities. All hazards and dangers cannot be foreseen. Depending on the particular activity, certain risks, dangers and injuries may exist due to inclement weather, slips and falls, poor skill level or conditioning, carelessness, horseplay, unsportsmanlike conduct, premises defects, inadequate or defective equipment, inadequate supervision, and instruction or officiating. In this regard, it is impossible for MEI, AHMA, SEMA, and Donald Moore to guarantee absolute safety.

Please read this form carefully, and be aware in registering yourself or your minor child/ward for participation in this course(s)/program(s)/activities, you will be expressly assuming the risk and legal liability and waiving and releasing any and all claims for any and all injuries, including death, damages and losses, regardless of severity, you or your minor child/ward might sustain arising out of, or as a result of participating in any and all activities connected with or in any way associated with such course(s)/program(s).

I recognize and acknowledge that there are certain risks of physical injury to participants in the course(s)/program(s), and I voluntarily agree to assume full risk of any and all injuries, including death, damages and losses, regardless of severity, which I or my minor child/ward may sustain arising out of, or as a result of participating in any and all activities connected with or in any way associated with such course(s)/program(s).

I agree to waive and relinquish any and all claims I or my minor child/ward may have against Moore Endeavors, Inc., Academy of Hosinsul & Martial Arts, South Elgin Martial Arts, Donald Moore, and any and all of their instructors, assistants, officers, agents, servants, and employees as a result of participating in any and all activities connected with, arising out of or in any way associated with such course(s)/program(s).

I do hereby fully release and discharge Moore Endeavors, Inc., Academy of Hosinsul & Martial Arts, South Elgin Martial Arts, Donald Moore, and any and all instructors, assistants, officers, agents, servants and employees from any and all claims resulting from any and all injuries, including death, damages and losses, regardless of severity sustained by me or my minor child/ward as a result of participating in, arising out of, connected with, or in any way associated with any and all of the activities of such course(s)/program(s).

I further agree to indemnify and hold harmless Moore Endeavors, Inc., Academy of Hosinsul & Martial Arts, South Elgin Martial Arts, Donald Moore, and any and all instructors, assistants, officers, agents, servants and employees from any and all claims resulting from any and all injuries, including death, damages and losses, regardless of severity sustained by me or my minor child/ward, arising out of, as a result of participating in, connected with, or in any way associated with any and all of the activities of such course(s)/program(s).

In the event of an emergency, I authorize Moore Endeavors, Inc., Academy of Hosinsul & Martial Arts, South Elgin Martial Arts, Donald Moore, and any and all instructors, assistants, officers, agents, servants, and employees to secure from any licensed hospital, physician, and/or medical personnel, any and all treatment(s) deemed necessary for me or my minor child/ward's immediate care and agree that I will be solely responsible for payment of any and all medical services rendered.

I have read and fully understand the above warning of risk, assumption of risk, waiver and release of any and all claims, and emergency treatment permission.

ALL PARTICIPANTS MUST SIGN THE WAIVER

Signature: _____ **Date:** _____

(Must be signed by parent or legal guardian if participant is under 18 years old.)