







# Stellar Martial Arts

10142 Jones Rd. Ste. B3, Houston, Texas 77065 • 281-477-7788 • [StellarMartialArts.com](http://StellarMartialArts.com)    

Release/Indemnification of all Claims and Covenant not to Sue

**NOTICE: THIS IS A LEGALLY BINDING AGREEMENT.** By signing this agreement, you give up your right to bring a court action to recover compensation or obtain any other remedy for any injury to you or to your property or for your death however caused arising out of your use of the SMA facility, now or any time in the future.

**I ACKNOWLEDGE AND AGREE** that the use of and participation of birthday parties at the Universal Taekwondo-Hapkido & Student Care Facility, Inc., dba Stellar Martial Arts (SMA) facility has inherent risks. I have full knowledge of the nature and extent of all risks associated with indoor martial art facility, including but not limited to:

In consideration of my participation at the SMA facility, I, the undersigned user (or parent/guardian of guest(s)), agree to release, indemnify, and hold harmless, on behalf of myself, my heirs, representatives, executors, administrators, and assigns **Hereby and do release, indemnify and hold SMA** its officers, agents, and employees from any cause of action, claims, or demands of any nature whatsoever, including but not limited to, a claim of negligence, which I, my heirs, representatives, executors, administrators, and assigns may now have, or have in the future against SMA, on account of personal injury, property damage, death, or accident of any kind, arising out of or in any way related to my use of the SMA facility, whether that use is supervised or unsupervised, however the injury or damage is caused, including, but not limited to the negligence of SMA, its officers agents, and staff/employees.

I hereby certify that I and/or my child are in good health and that I and/or my child have no physical limitations which would preclude safe participation in the SMA birthday party activities. I further understand that the terms of this agreement are legally binding. I certify that I am signing this agreement, after having read it.

BY SIGNING BELOW, I CERTIFY THAT I HAVE READ AND UNDERSTAND THE POSTED.

SMA birthday guests(s) irrevocably authorize its successors and assigns, and those acting under its authority, to copy, use, publish for art, advertising, trade, or any other lawful purpose whatsoever, photographic portraits, pictures or DVDs, videos, Facebook, twitter, etc. its' guest(s), in which I may be included in whole or in part and may be used without compensation to guest(s). The names of guest(s) and any photographs or videos taken during SMA activities may be used without compensation to guest(s).

Date \_\_\_\_\_

Guest's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender M/F

Guest's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender M/F

Guest's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender M/F

Guest's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender M/F

Parent/Guardian (please print) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Emergency Contact Number \_\_\_\_\_

**Parent or Guardian Signature is Required:** \_\_\_\_\_

(Participant's signature if 18 or over or Parent or Legal Guardian)

**E-mail Address** \_\_\_\_\_

(This information will only be used to notify you of special events, coupons, rates, and other news related to the SMA facility and will not be sold bartered or otherwise leave our possession)