



## PARENTAL CONSENT FORM, WOMEN'S SELF-DEFENSE

I \_\_\_\_\_, authorize my daughter,  
\_\_\_\_\_, to attend the upcoming Women's Self-Defense course offered by Roar Taekwondo, 6751 Old Monroe Road, Suite 101, Indian Trail, NC 28079 on \_\_\_\_\_.

My signature below hereby acknowledges to Roar Taekwondo, its Staff, Instructor(s) and Assistants of this class:

That my daughter will not participate in any aspect of the program she is uncomfortable with or considers unsafe.

That my daughter and I are aware of the physical nature and possible risks of injury incident to taking this practical course in self-defense. That she is physically fit to participate in this course, involving various physical techniques; and that she realizes that self-defense techniques cannot be successfully employed in every situation, and proficiency can only be achieved and is dependent upon thorough continued practice, exercising good judgment, and a person's natural abilities.

The signatures below hereby release Roar Taekwondo, its Staff, Instructor(s) and Assistants of this class and agrees to hold them harmless, from liability for injury that may be incurred as a result of participation in this course or using the strategies within for release.

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT VOLUNTARILY.

Signature of Legal Guardian \_\_\_\_\_

Telephone Number for Confirmation \_\_\_\_\_

Date \_\_\_\_\_ e-mail: \_\_\_\_\_

Signature of Student \_\_\_\_\_ Date \_\_\_\_\_