

پاکستان جو جیٹسو فیڈریشن

Pakistan Ju-Jitsu Federation



Photograph
attach two recent
Passport size Photographs

Student

Registration Form

Computer Code

Club Registration No

(To be filled by the Office)

Roll No

Class

Club

Height

Weight Category

Date of Joining

Name

Father's Name & Occupation

Gender (F/M)

Date of Birth

Place of Birth

Address

Ambitions

Phone

E-mail

Name of Institution/School/College

Signature (Player)

Signature (Coach)

(To be filled by the Office)

Promoted to Rank

on

on

on

on

on

on

on

Observation by Federation



NOTICE

This is a legal document which must be properly completed and signed or your entry will not be accepted. PLEASE READ CAREFULLY. It eliminates your right to sue under all circumstances. If you do not understand it, obtain legal advice before signing.

RELEASE, INDEMNITY, WARRANTY, AND ASSUMPTION OF RISK

In consideration of the acceptance of the entry to compete in and/or my being permitted to participate in the Ju-Jitsu Training at -----
(hereinafter referred to as "Training Club") I hereby release, remise and forever discharge, and agree to indemnify and save harmless the Pakistan Ju-Jitsu Federation (**PJJF**), Lahore of this training, their respective officers, executives, officials, teachers, coaches, servants and representatives (hereinafter referred to as "the releases") from and against all claims, actions, costs, expenses and demands in respect of death, injury, loss or damage to my person or property, howsoever caused, arising out of or in connection with my competing or participating in this training and notwithstanding that the same may have been caused by, contributed to or occasioned by the negligence, breach of contract, breach of a common duty of care as an occupier of premises, or otherwise, of or by the releases or any of them.

I agree to assume all risk, both known and unknown, and all consequences thereof, arising out of or in connection with my competing or participating in this training. I agree to adhere all rules, regulations and conditions of this training.

I certify that:

1. I am in good physical condition and I have no injury, disease or disability nor have I injected or ingested anything that would impair my performance or physical condition or increase the likelihood of injury in competing or participating in this training.
2. Parent(s) or legal guardian(s) of minor participants under 18 years of age additionally agree that they will instruct the minor participants to the above warnings and conditions and their ramifications, and that they consent to the minor's participation.

This document shall be binding upon myself, my heirs, executors, administrators, assigns and personal representative.

I have read this document, understand that I give up substantial rights by signing it and knowing this, sign it voluntarily. I agree to participate knowing the risks and conditions involved and do so entirely upon my own free will.

Participant Signature

Date

Name _____

Parent/Guardian Signature

Date

Name _____
