



**DUKES MARTIAL ARTS ACADEMY**

Traditional Okinawan-Kobudo  
Masubayshi Shorin Ryu Karate  
D.S.D.I. Official Training Course  
246-B Church St. Concord, NC 28025



Karate   
Self Defense

Membership ID# \_\_\_\_\_  
Enrolment \$ \_\_\_\_\_  
Monthly Fee \$ \_\_\_\_\_  
Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  Male  Female

Address: \_\_\_\_\_ Apt. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone# \_\_\_\_\_ (Cell) \_\_\_\_\_

**Additional Family Members for Classes:**

Name \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Name \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Name \_\_\_\_\_ Age \_\_\_\_\_  Male  Female

Students will abide by all the rules and regulations of the Dukes Martial Arts Academy. Students are asked to attend as many classes as possible and be on time to the sessions. All uniforms must be neat and clean at all times. Should any monthly payment become more than five days past due, you will be charged a \$5.00 late fee. Any returned checks; you will be charged a \$25.00 fee. Make check payable TO: (D.M.A.A.) Dukes Martial Arts Academy.

**LIABILITY WAIVER:**

By Signing below I do hereby remiss, and forever discharge Master Ernest Dukes, The Dukes Martial Arts Academy, all Employee, volunteers, and all affiliates of any afore named, of any and all forms of liability, claims, demands, actions, and causes of action whatsoever, arising, out of or relating to any loss, damages, or injury including death, that may be sustained. The undersigned, being duly aware of the risks, and hazards involved, hereby elects to voluntarily assume all risk of loss, damage or injury including death that may be sustained. The release shall be binding upon, but not limited to, the distributor, heirs, next of kin, executors and administrators of the undersigned. In signing the foregoing release, the undersigned hereby acknowledges and hereby represents that he/she has read the foregoing release, understands it, and voluntarily signs it.

Signature or Parent/Guardian who assumes complete responsibility (if under the age of 18)

Print Name: \_\_\_\_\_

Sign: \_\_\_\_\_ Date: \_\_\_\_\_