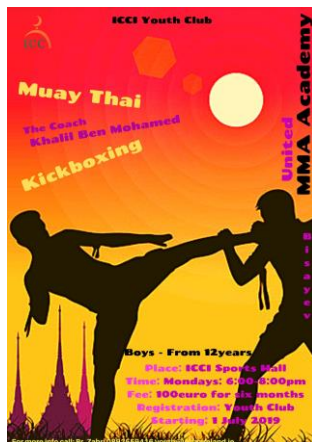




ICCI Youth Department



Muay Thai and Kickboxing Registration

Name of Participant _____/

Date of Birth: ____/____/____/ Years: ____/ Mobile number: _____/email: _____/

Address: _____/

Have you taken Martial Arts classes before?

☐ Yes ☐ No

Do you have any medical history or conditions that could affect your ability to participate in contact sports? *

☐ No ☐ Yes (If Yes please enter details)

• Membership Muay Thai and Kickboxing Gym Rules and Etiquette

1. **Show up on time. Better yet, show up 10-15 min early.**
2. **No shoes on the mat.**
3. **Have and bring your own gear.**
4. **Wash/air out/sanitize your gear!** To prevent possible injury, it is not allowed to wear jewellery, watches, or other sharp adornments during class. Prescription eyeglasses are permitted, however, during sparring, their removal or the use of contact lenses is strongly recommended, as is the use of shinpads, gloves, breast and groin cups.
5. **Other basic hygiene...** Cut your nails short including your toenails. Wear deodorant. Wash your clothes. Tie your hair back if it's long. Use a towel or bring an extra shirt if you sweat more than other people. Don't train when you're sick so you don't get others sick.
6. **Wear compression underwear!** Under your thai shorts wear compression shorts.
7. **Be silent and listen respectfully when the trainers are talking.**
8. **Do what you're told.**
9. **Don't spar at 100%** (unless you already made sure your sparring partner is ok with it).
10. **Clinch hard, knee softly.** Wash your hands before clinching.
11. **Respect everyone.** Bulling is not tolerated in or out of the Martial Arts. Members using their Muay Thai and Kickboxing skills for bulling will not be allowed to return for training.
12. **Have realistic expectations.** Keep going and don't give up

☐ I have read, understood, and accepted the rules for membership.



ICCI Youth Department



• Payment Policy

I understand that ICCI Youth Club does require members to register before start training. I understand that the fee is 100euro for six months, members may cancel by notifying the Coach at any time if valid reason is provided, and refund will be made for the outstanding time.

I agree to pay my club dues in the beginning of the six months period by Cash or Cheque payable to ICCI. I understand that any other personal gear, or promotion is paid by the participants.



Privacy Policy

I understand that occasionally, photos and videos from club competitions and practices will be used in promotional material for the club. I agree to allow my image or my child's image to be used for this purpose and that I will not be compensated. I also understand that once a promotional item has been produced, it is not possible to remove my image or my child's image from the production.

I understand that the club will never share my contact information for commercial purposes. I may, however, be contacted by the ICCI's Martial Arts Academy about club announcements and information relevant to club membership.

• Disclaimer and Waiver of Liability

1. Recognize and understand that martial arts training is a physical contact activity and that my participation might result in serious injury, including permanent disability or death, and severe social and economic loss.
2. Recognize and understand that such risk may be due to not only my own actions, but also the action, inaction or negligence of others.
3. Recognize that there may be other risks that are not known to me or to others or not reasonably foreseeable at this time.
4. Agree to inspect the facilities, equipment and pairings prior to participation. I will immediately inform an instructor if I believe that anything is unsafe or beyond my capability and refuse to participate.
5. Assume all of the foregoing risks and accept personal responsibility for any damages that may result from injury, permanent disability or death.
6. I Enter martial arts training and/or competition entirely of my own free will and understand the importance of following the rules of training and competition.
7. I certify that I am in good physical condition, and have no disease, injury or other condition that would impair my performance or physical and mental well-being during training practice and/or competition. If I have any injuries or illnesses that could affect my ability to participate, I will notify the club managers and coaches, and discuss the appropriateness of martial arts training with my or my child's doctor.
8. I Grant permission in case of injury to have a doctor, nurse, athletic training or other emergency medical personnel provide me or my child with medical assistance or treatment for such injury. ICCI has a liability insurance however any cost which exceeds the cost of any treatment or hospitalization arising from injury during training or play shall not under any circumstance be paid by ICCI, its affiliated organizations and governing bodies, their officers, instructors and personnel, other members of the organizations, participants, supervisors, coaches, sponsoring organizations or their agents.
9. I Release, waive, discharge and covenant not to sue, ICCI, its affiliated organizations and governing bodies, their officers, instructors and personnel, other members of the organizations, participants, supervisors, coaches, sponsoring organizations or their agents, and if applicable, owners and leasers of the premises from any and all liability to the undersigned, his or her heirs and next of kin for any and all claims, demands, losses and damages which may be sustained and suffered on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the relesees or otherwise.



I have read, understood, and accept the disclaimer and liability waiver and sign it of my own free will*

I _____ Parent/Guardian of _____ give consent for my child to participate in the Muay Thai and Kickboxing training in the ICCI. The trainings will be on Mondays from 6:00 to 8:00pm. The coach's name is Khalil Ben Mohamed. I take full responsibility for any issues that may arise from our part related to the training. I also give consent that my child's age is the correct age as stated above. *** I have read, understood and agreed with the information, rules and regulations below and overleaf and sign it of my own free will.**

In case of an emergency contact me: _____ or (next of kin) _____ on tel. _____

I am paying 100euro for six months training for the period: From date: _____ until date: _____

*Signature of Parent/Guardian: _____ Date: _____ Signature of Participant _____

Receipt: The ICCI Youth Club Received _____ euro fee for Muay Thai and Kickboxing training for

(member) _____ for the period: From date: _____ until date: _____

Received from: _____ Signature (ICCI Youth Club) _____