



**COSZACKS  
SCHOOL OF SELF-DEFENSE**  
Karate/ Kung-Fu / Judo / Martial Arts Weapons / Tournament Competition  
ZANESVILLE OHIO  
453-KICK



**MASTER C. JEFFREY HARDWICK  
5<sup>TH</sup> DEGREE BLACK BELT**

STUDENTS' NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: STATE: ZIP: \_\_\_\_\_

DATE Of BIRTH: \_\_\_\_\_

PHONE: HOME: \_\_\_\_\_ CELL \_\_\_\_\_

EMAIL: \_\_\_\_\_

**THE UNDERSIGNED FULLY UNDERSTANDS THAT IN CASE OF ACCIDENT OR INJURY, THE INSTRUCTORS, BUILDING, GROUNDS, OR ANY OTHER PERSON CONNECTED WITH THE COSZACKS SCHOOL OF SELFDEFENSE OR THE SEO CHEER AND TUMBLE CENTER WILL NOT BE HELD RESPONSIBLE.**

STUDENTS' SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_  
(If 18 Years of Age)

**IF UNDER 18 YEARS OF AGE HAVE PARENTS COMPLETE THIS SECTION**

I HAVE READ THE ABOVE WAIVER & ACKNOWLEDGE THAT I AM SAID STUDENTS PARENT/S OR LEGAL GUARDIAN.

PARENT/S SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

PARENTS NAME \_\_\_\_\_

ADDITIONAL INFORMATION OR PHONE#'s \_\_\_\_\_

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