

## HAN MOO KWAN TAE KWON DO CLUB

## Parent/Guardian Release Form

l,	_ hereby give permission for	to
(parent/guardian)	(participant)	
participate in Han Moo Kwan Tae Kw	on Do Club classes and events without parental or gua	ırdian
supervision. I am aware of all the Ha	n Moo Kwan Tae Kwon Do Club policies. In the event	of a medical
situation, I authorize the Chief Instruc	ctor or most senior Certified Instructor of the Club to use	e his or her best
judgment in allowing the participant to	o receive emergency/medical attention in accordance w	ith the Club
Emergency Medical Procedure.		
I understand that this condition is a pr	rivilege and can be revoked by the parents, Club Presid	dent, or the
Chief Instructor at any time.		
Parent/Guardian Signature:	Today's Date:	
Day Phone #:	Evening Phone #:	
In the event the parent/guardian is no	ot reachable:	
Alternate contact:		
Day Phone #:	Evening Phone #:	