

Self Defense TAE KWON DO



Tae Kwon Do can:

- *Improve overall well-being
- *Brings out healthy emotional and physical balance
- *Increases agility and flexibility
- *Teaches the necessary skills for successful self-defense

Instructor: Mr. Paco Narangjo (Cho Dan)

Former student of Sabumni Boris Jeremenko

When: Tuesdays and Thursdays

Time: 6:00pm Beginners

7:00pm Intermediate

8:00pm Advance

Ages: 7-18 years old

Cost: \$15/month

Class space is limited, so register early.

To attend class you must be registered by the 2nd week of the month.

NO REGISTRATION IS ALLOWED AFTER THE 2ND WEEK OF CLASS!!



"Never attempt to resist an attacker with a weapon if it only means giving up your money or property. Only fight back if it means giving up your life."



SALT LAKE COUNTY For More Information or to Register visit
PARKS & RECREATION Sorenson Multicultural Center
855 W. California Ave
385-468-1300



For inclusion opportunities for people with disabilities, contact Katie at 385-468-1297 or kobray@slco.org.

Self Defense TAE KWON DO

Name of child _____

PLEASE PRINT: (last name) _____ (first name) _____

CLASS (Please circle): 6:00pm-Beginning 7:00pm-Intermediate 8:00pm-Advanced

Address _____ City _____ State _____ zip _____

School _____ Grade _____ Birthday _____ Age _____

Parent or Guardian _____ Phone: _____ Work: _____

E-Mail Address _____

In emergency notify (other than parent or guardian)

Name: _____ Phone: _____

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

Assumption of Risk: I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities. **Release:** In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities. **Indemnification:** In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities. **Refund:** Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program. **Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection. **Emergency Treatment:** I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom. **Media Consent:** I hereby grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation. **Name Posting:** Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: _____

Signature (Parent or Legal Guardian): _____ Date _____



Check here to be contacted about inclusion opportunities for people with disabilities.

OFFICE USE ONLY... Receipt No. _____ Amt. \$ _____ Recv'd. by _____ Date _____ Head Waiver _____