



35th Annual Korean Martial Arts Summer Camp

June 26–July 8, 2011 • South Korea • www.ucmap.org/korea.php

Sponsored by UC Martial Arts Program

2301 Bancroft Way
145 RSF
Berkeley, CA 94720

510.642.3268
telephone

510.642.5730
fax

Health Information and Medical Insurance Form

Last Name _____ First Name _____ M.I. _____

Birth date: _____

Medical Conditions and Known Injuries (*Attach another sheet if necessary*)

Prescribed Medications (*Remember to bring your prescription medications*)

Known Drug and Food Allergies (*Attach another sheet if necessary*)

Special Needs and Dietary Requirements (*Attach another sheet if necessary*)

Medical Insurance

Insurance Company Name _____ Policy Number _____

Insurance Company Emergency Contact Phone _____ Policy Expiration Date _____

Subscriber's Last Name _____ Subscriber's First Name _____ Relation _____

Subscriber's Street Address _____ City _____ State _____ Zip _____

Emergency Contact

Last Name _____ First Name _____ Relation _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

I freely provide this information to the organizers of the 35th Annual Korean Martial Arts Summer Camp, and solely during this event I authorize them to furnish this information to those who may need it to provide me with first aid or medical treatment. I understand that this record will be maintained in confidence with UCMAP until August 2013 at which time it will be destroyed.

Signature of Participant

Date

Signature of Parent/Guardian
(If under 18 years of age)

Date



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Release of Liability Form

In consideration of the privilege of participating in the 35th Annual Korean Martial Arts Summer Camp, which will be conducted in South Korea, for myself and for my heirs, children, parents, guardians, executors, personal representatives, administrators, successors and assigns, I forever release, acquit, waive, discharge, and covenant not to sue the 35th Annual Korean Martial Arts Summer Camp, Yong-In University, the University of California Martial Arts Program, and the University of California, or any of the organizers, volunteers, sponsors, affiliated organizations, coaches, instructors, managers, trainers or doctors, or any other persons involved in the 35th Annual Korean Martial Arts Summer Camp, or any of their regents, directors, officers, managers, employees, agents, affiliates, attorneys, spouses, heirs, executors, administrators, successors or assigns. I further agree to hold each of them harmless and to indemnify each of them from liability arising from any and all claims (including for the negligence of any of them that may result in personal injury, accident, illness or death), demands, costs, damages, actions, causes of action, or suits of any nature or kind that are in any way related to my training for, traveling to, participating in or returning from the 35th Annual Korean Martial Arts Summer Camp, or to my use of the facilities, premises or equipment involved in the 35th Annual Korean Martial Arts Summer Camp, whether at Yong-In University, or any place en route.

Further, in the event I am injured, either at Yong-In University or elsewhere during my participation in the 35th Annual Korean Martial Arts Summer Camp, I hereby grant permission to any and all of the licensed athletic trainers, emergency medical technicians, nurses or doctors involved in the 35th Annual Korean Martial Arts Summer Camp to provide me with medical assistance and treatment and, if needed, to transport me to a hospital or other treatment facility. For myself and for my heirs, children, parents, guardians, executors, personal representatives, administrators, successors and assigns, I forever release, acquit, waive, discharge, and covenant not to sue the 35th Annual Korean Martial Arts Summer Camp, Yong-In University, the University of California Martial Arts Program, and the University of California, or any of the organizers, volunteers, sponsors, affiliated organizations, coaches, instructors, managers, athletic trainers, emergency medical technicians, nurses or doctors, or any other persons involved in the 35th Annual Korean Martial Arts Summer Camp, or any of their regents, directors, officers, managers, employees, agents, affiliates, attorneys, spouses, heirs, executors, administrators, successors or assigns, and to hold each of them harmless and to indemnify each of them from any and all claims (including for the negligence of any of them that may result in personal injury, accident, illness or death), demands, costs, damages, actions, causes of action, or suits of any nature or kind that are in any way related to any injury I sustain or suffer in connection with the 35th Annual Korean Martial Arts Summer Camp or said medical assistance or treatment. I accept responsibility to pay for any and all financial obligations incurred as a result of any medical assistance or treatment provided in connection with any injuries or illness that I may sustain in the 35th Annual Korean Martial Arts Summer Camp.

My physician has examined me and certified that I am in good physical condition and have no disease or injury that would impair my performance or physical condition in training for or participating in the 35th Annual Korean Martial Arts Summer Camp. (I recognize that if I have any existing injuries that may affect my performance, I cannot participate in the 35th Annual Korean Martial Arts Summer Camp without a report from my physician authorizing my participation, and I verify that if I have any such injuries, the requisite report is attached to this form.) I further certify that no coach, doctor, nurse, athletic trainer or other person has advised me not to participate in the 35th Annual Korean Martial Arts Summer Camp.

I also certify that I am familiar with martial arts and training in connection with martial arts, including but not limited to Taekwondo, Yongmudo, Judo, Kumdo, and Ssireum. I am aware, acknowledge and agree that by the very nature of martial arts, and the physical contact involved, there is a high risk of injury related to participating in martial arts, and I assume all risk relating to my participation in martial arts in the 35th Annual Korean Martial Arts Summer Camp.

For myself and for my heirs, children, parents, guardians, executors, personal representatives, administrators, successors and assigns, I waive, release and forever discharge any and all rights and claims I may have in any video or still photography or other likenesses taken of me during any practice or performance during the 35th Annual Korean Martial Arts Summer Camp, as well as in any materials produced for or presented to the 35th Annual Korean Martial Arts Summer Camp.

I have read this Release of Liability and I fully understand its terms. I understand that by entering into this agreement I am giving up substantial rights, including the right to sue. I understand that this agreement is incorporated by this reference as a part of my application form for participation in the 35th Annual Korean Martial Arts Summer Camp. I also understand that entering into this agreement is a condition precedent to and is consideration for the privilege of participating in the 35th Annual Korean Martial Arts Summer Camp. **I acknowledge that I am signing this agreement freely and voluntarily, and intend by my signature to make a complete and unconditional release of all liability to the greatest extent permitted by the laws of the State of California. If any portion of this agreement is held invalid, I agree that the balance of it shall nevertheless continue in full force and effect.**

Please initial and sign below:

- _____ I have read the above release and understand the contents. I understand there are risks of injury involved in participating with the 35th Annual Korean Martial Arts Summer Camp and I voluntarily assume such risk.
- _____ I attest that I am physically fit to participate in 35th Annual Korean Martial Arts Summer Camp activities.
- _____ I attest that all information provided above is true and complete to the extent of my knowledge.

Signature of Participant

Date

Signature of Parent/Guardian
(If under 18 years of age)

Date