



Royler Gracie BJJ Seminar Registration

October 22-23 12-3pm

Please Print Clearly

Location: Saint Paul Warrior's Cove – 2900 Rice Street, Little Canada, MN 55113

First Name _____

Last Name _____

Age _____ Cove Seniority Number _____ Phone _____

Email Address _____

BJJ Belt Rank _____ MMA Belt Rank _____

Check if currently on Competition Team – []

Check if on Instructor Program and currently on weekly schedule for duties – []

If not a Cove Member, Home Address _____

City _____ State _____ Zip _____ Martial Art School _____

Please check one or both of the Seminars you are Registering for.

Note: Those registering for both seminars will have priority in the likely event the seminar sells out.

[] - October 22nd, 12-3pm. Cost = \$100 [] – October 23rd, 12-3pm. Cost = \$100

Payment [] Check (Attached) Credit Card: [] Visa [] Master Card [] Discover [] American Express

Credit Card# _____ Exp. _____ 3 Digit Code _____

Name on Card _____

Address For Card _____

Cardholder Signature _____ Date _____

Note: Martial art and fitness related training is a strenuous activity. You should always seek a doctor's advice before participating in any type of strenuous training, or training that might aggravate any existing condition. **It is your responsibility to notify us if your doctor has determined that you should not participate in our training. We do not allow training against a doctor's advice.**

Please read the following Waiver and make sure you understand it.

ACKNOWLEDGMENT, ASSUMPTION OF RISK, and WAIVER

ACKNOWLEDGEMENT: I acknowledge that participating in martial arts, fitness, and related activities, is accompanied by the possibility of serious injury or harm. I further acknowledge that without first executing this form, I (or the minor for whom I am guardian) will not be allowed to participate or train at any Warrior's Cove premises, class, or event.

ASSUMPTION OF RISK: In consideration of the Warrior's Cove allowing me (or the minor for whom I am guardian) to participate in any Warrior's Cove related activity, and/or accepting my registration, I hereby assume all risk of harm or injury, known or unknown, foreseeable or unforeseeable, now and in the future.

WAIVER: I hereby waive any claim of injury or harm by or through me (including any of my heirs, successors and assigns) against the Warrior's Cove or Warrior's Cove employees, independent contractors, instructors, owners, agents, officers, directors, members, event organizers, shareholders, or business entities, regardless of cause or fault.

Participant Signature _____ Date _____

Guardian Signature _____ Date _____

More Seminar Information On Back

Registration information

Prepayment is needed to reserve your spot.

If you don't get an email confirmation of your registration within 7 days, contact us at info@WarriorsCove.com.

Space is Limited to 50 members.

To keep the process orderly, we are offering registrations according to rank & seniority.

Also, those attending both Saturday and Sunday will have priority over those who can only attend one day.

Each group will have a short time to preregister prior to us opening registration to the next group in line.

See www.WarriorsCove.com for who is allowed to register on specific dates.

Payment Information

If paying by check, please make checks out to the Warrior's Cove, with "Royler Seminar" on the memo line.

Credit Card payment can be written on the Registration Form.

- You can drop off your Registration Form & Payment at any Warrior's Cove **lobby drop box**
- You can also mail Registration Form & Payment to: Warrior's Cove Office, 1701 Oakland Rd, Minnetonka MN, 55305.
- Scan & email Registration Form with Credit Card information to info@WarriorsCove.com.

Cancelation & Refund Policy

You may cancel up to September 30th for an 80% Refund.

No Refunds after September 30th for any reason.*

*In the unlikely event the seminar is canceled by the Warrior's Cove, full refunds will be given.