



Royler Gracie BJJ Seminar Registration

October 20, 2012 11-2pm

Please Print Clearly

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

First Name _____

Last Name _____

Age _____ Phone _____ Alt Phone _____

Email Address _____

BJJ Belt Rank _____ MMA Belt Rank _____

Home Address _____

City _____ State _____ Zip _____

Training Partner (Only For Family Class Kids) _____

MASTER ROYLER GRACIE

4-Time World BJJ Champion!

3-Time ADCC World Champion!

2-Time Pan Am BJJ Champion!

7th Degree BJJ Master!

October 20th, 11-2pm. Cost = \$100

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

Credit Card# _____ Exp. _____ 3 Digit Code _____

Name on Card _____

Cardholder Signature _____ Date _____

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

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.**

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.

Space is Limited to 50 members. Seminar will be filled in the following order...

- Before Sep 30th - Registrations from Cove [BJJ Blue Belts & above](#) or Cove [MMA Red Belts & above](#).
- After September 30th - [All Cove Members](#) according to date registration was received.
- Note: [All Cove Members](#) can send in their registration at anytime. No need to wait after Sept 30th.
- Kids from Family MMA Class can attend if registering with another training partner from the Family Class.

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](#)
- Scan & email Registration Form with Credit Card information to info@WarriorsCove.com.
- You can also mail Registration Form & Payment to: Warrior's Cove Office, 1701 Oakland Rd, Minnetonka MN, 55305. DO NOT MAIL (USPS) AFTER OCTOBER 17TH TO MAKE SURE WE HAVE TIME TO RECEIVE IT.

Cancellation & Refund Policy

- In the unlikely event the seminar is canceled by the Warrior's Cove, full refunds will be given. No Refunds for any other reasons after October 15th.