M/	D/YYYY:		The Adrian Empire, I	Inc. OFFICIAL SIGN-IN FORM	Eve	nt ID:			Page	_ of
Ch	apter:		Version 7/2021.	© Adrian Empire, Inc. 2021		-				
Des	scription:		Crown Approval:		Autoc					
(the 'activi equip In co from, and p a boa I, TH	Programs") is vo ties. I understand oment participation insideration for my are caused by, co property. Should a ard. The arbitration	luntary. I understand that there are risks and dangers I that ADRIA does NOT provide any insurance covera in or personal safety and voluntarily accept all risks as y being permitted to participate in the Programs, I free or are related in any way to the Programs. In addition, any disputes arise from my participation in any Progra in may take place wherever the parties mutually agred D, HEREBY AFFIRM THAT I HAVE READ, UNDERS	and participation in activities conducted by or on behalf of A s inherent in participating in the Programs including but not age for my person or my property. I acknowledge that I am r	limited to, injury due to sword fights and/or martial arts responsible for my safety, my own health care needs, sofficers, directors, agents and assigns (the "Releaseries from any loss, liability, damage, or cost which they procedures of ADRIA. If these procedures do not lead wise, and in any case the laws of the state of Arizona wise, and in any case the laws of the state of Arizona wise.	release and waiver. s, property damage, and for the protection d Parties") from any may incur as a direct to the resolution of th will apply.	I acknowledge that redeath, or mental or en of my property. I re and all claims, liabilit to rindirect result of ne dispute, I agree to	my participating in ar motional distress. I r present that I will ob y, injuries, losses, d my participation in the submit it to a board	represent the preserve all A amages, or the Program for binding	hat I am physically capable of participation in ADRIA rules or directions of ADRIA officials or costs of any kind or nature (known or unknown, including damage or destruction of ADRI graphitration and to abide by the decisions re	in ADRIA regarding nown) that arise tlA's equipment eached by such
VVIIC	CHAPTER	LEGAL NAME (Last, First)	SIGNATURE: Parent/Guard. if minor	PERSONA NAME (or GUEST)	K2/K3	EstHldr	Crown	Ret	MINISTRY DUTIES	
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