NAME (Please Print)

_____

Address

Email

Phone

_____

I , the undersigned, assume any and all loss to myself, my child, or others, and waive any and all claims of damage against American Martial Arts, Inc../Special Programs for Special Kids, Inc. their principals, agents, representatives, & employees/partners and agree to hold harmless said institutions and its principals, agents, representatives, and employees/partners from any and all claims resulting from this event. This agreement is non revocable.

Signature:_____

Date:_____ _____

If under 18 years of age, Parents Signature

Dear Sponsor:

Please help Special Programs for Special Kids by pledging 10, 25, or 50 cents or more per board or by making a flat donation. For the safety & convenience of the participant, we request that you do not give cash. Please make your tax-deductible check payable to Special Programs for Special Kids, Inc. Thank you for your support of our programs

NAME	PHONE	PER BOARD	TOTAL PLEDGE	Flat Donation
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Total Pledges $_____ + Flat Donation $ _____ = Total Amount Collected $ _____