



617-924-4466

100 Parker Street, Watertown, MA 02472

fencingacademyofboston@gmail.com

www.fencingacademyofboston.com

Registration Form

FENCER'S NAME: _____

*Insurance regulations require membership in the USA Fencing to fence at FAB.
Join or renew online at <https://member.usafencing.org/signup>*

Fencer's USA Fencing

Membership Number: _____ Expiration Date: _____

18 or over: Yes No If under 18, Year of Birth: _____

If under 18, name of Parent or Guardian: _____

Relationship to Fencer: _____

Email address (of parent or guardian, if applicable): _____

Address: _____

Phone 1: _____ Phone 2: _____

or circle

Primary Weapon: _____ NONE Primary Coach: _____

Beginner Fencing Classes:

- Fabbies Fencing - ages 6-9
- Youth Beginner Fencing - ages 9-14
- Adult Intro to Fencing - ages 15+

Competitive Classes:

- Youth Competitive Training - ages 8-14

Club Membership:

- Full-year (Sep. 1-Aug. 31)
- By-the-month

Other:

- Lesson, Party, Floor Fee, etc. _____

For Office Use Only

continued on other side



Waiver and Consent

Emergency Contact 1: _____ Phone: _____ Relationship: _____

Emergency Contact 2: _____ Phone: _____ Relationship: _____

Place the word "yes" in the space after reading each paragraph to indicate your acceptance.

Assumption of Risk. Fencing, like any athletic activity, involves physical exertion and risk of injury. Fencers and spectators assume the risk of any injury or medical condition arising from their participation in fencing at Fencing Academy of Boston. _____

Waiver of Liability. I understand and appreciate that participation in a sport carries a risk to me or the minor under my guardianship of serious injury, including permanent paralysis or death. Intending to be legally bound, I hereby release for myself, any minor under my guardianship, heirs, executors, and administrators, any and all rights and claims for damages against the Fencing Academy of Boston, its sponsors, coaches, instructors, officials, members, guests, associates, investors, and other participants, and the U.S. Fencing Association, for any and all injuries or loss or damages incurred as a result of participation in the Fencing Academy of Boston fencing program or any use of its facilities. _____

Consent to the Code of Conduct. I have read and accept my responsibility and any minor under my guardianship's responsibility to abide by the Fencing Academy of Boston's Code of Conduct attached hereto.

Signatures below indicate that the above information is true and correct, that the required fees will be paid, and the Assumption of Risk, Waiver of Liability, and Consent to the Code of Conduct are agreed to and accepted by me on my behalf or on behalf of a minor under my guardianship:

Member's Signature: _____ Date: _____
(Fencer must sign if over 18.)

Parent's or Legal
Guardian's Signature: _____ Date: _____
(A parent or legal guardian must sign for fencers under the age of 18.)

Additional Consent. I give my permission for my minor child or ward to participate in Fencing Academy of Boston programs, classes, and lessons.

Parent's or Legal
Guardian's Signature: _____ Date: _____

Images and Identification. I grant permission to Fencing Academy of Boston to use, reproduce, distribute and/or publicize my photographic likeness and/or the photographic likeness of the minor under my guardianship with or without identification. Publication, use and distribution of any photographic likeness of myself or my child or ward may be by any means and in any media, including brochures, pamphlets, instructional materials, newspapers, magazines, television, books, social media, Internet, and web pages. I understand that consent is voluntary and may be revoked in writing at any time.

Member's Signature: _____ Date: _____
(Fencer must sign if over 18.)

Parent's or Legal
Guardian's Signature: _____ Date: _____
(A parent or legal guardian must sign for fencers under the age of 18.)