## Southern California Surf Association

## サーフィンスクール申し込み書

参加者名:			
住所:			
E-mail:			
電話番号:			
年齢:			
身長:	体重:	性別(男女)	
レッスン日: 月 日	曜日 時間:		
緊急時のインフォメーション			
参加者名:			
保険:			
ポリシーナンバー:			
当日連絡が可能な方のお名前:			
電話番号:			
特別な病気や制限される事柄はありますか?			

事前に希望日に予約を入れて頂き、仮申し込みをした後レッスン受講日の5日前までに申し込み用紙、 規約書、およびレッスン料を郵送して下さい。(お支払いは、チェック、又はマネーオーダーで。) 一旦申し込まれたレッスン料は返金致しかねます。

当レッスンは、天候、波のコンディションを観察した上で行います。安全上の理由により、即座にレッスンを中止、変更する事もあります。中止の場合はレッスン料を返金致します。

必ず別紙の規約書にサインをし(18歳以下の方は保護者のサインも必要です)申し込み用紙とレッスン料を一緒に、下記まで郵送して下さい。

Pay to: Southern California Surf Association P.O.Box. 3615 San Clemente CA 92674 規約書:WAVER

By signing this waver, I, intending to be legally bound, acknowledge that the possibility of my child/dependent/myself being injured while attending the Surfing lesson(s) does exist.

Surfing is a dangerous sport, and such hazards as hidden rocks, rip tides, sting rays, and other dangers that come with the sport of surfing do exist. I/we fully recognize and understand the nature and existence of these inherent risks. In the event of any injury to my child/dependent/my self, (including my heirs and assigns), I hereby waive, hold harmless, and forever discharge from any liability damages or clams for damages for property injury, including accidental death, as well as for claims of property damage against the Southern California Surf Association, its owner/director and any officials, employees or sponsors connected with this lessons, and the U.S.Government, the State of California, and their member or agents. I also understand that any disruptive of damaging behavior on my part or on that of my child will be due cause for dismissal from this lessons, with no refund.

Participant's signature	Date
Signature of Parents or	Guardian
signature of Farents of	Guardian
	Date