

IMPACT Stunts

Application Form

Registration is based on a “first come, first served” basis for applicants who meet the qualifications.

Qualifications:

- Must be in good physical health and able to participate in a physically demanding training program.
- Must sign and submit application, and photo release forms.
- Must have Parent or legal Guardian consent to apply if under 18 years of age

A \$200.00 deposit is due along with the application. Your registration will NOT be processed until both the application and deposit are received. DEPOSITS ARE NONREFUNDABLE (see refund policy).

All payments must be made via cashiers checks, money orders, travelers’ checks, or credit cards. Visa, MasterCard, Discover Card, and Amex accepted. WE WILL NOT ACCEPT PERSONAL CHECKS.

The remainder of the costs for each class is due NO LATER than the day before the class (usually Friday).

Make all payments payable to: IMPACT Stunts

IMPACT Studios, IMPACT Stunts, and Wushu Inc. (herein referred to as IMPACT Stunts) reserves the right to exclude applicants who it feels is not suitable for this physically demanding training. IMPACT Stunts also reserves the right to cancel or postpone its stunt clinics and all training if it does not meet the minimal attendance requirements, schedule, conflicts, etc (see refund policy).

Applicant understands that during the course of instruction, instructors of IMPACT Stunts, other participants, or authorized persons will be engaged in a course of conduct requiring physical contact. Applicant gives full consent to such contact as is required by the training.

Applicant understands that strict observation of the rules and regulations relative to training include the use of protective equipment required by IMPACT Stunts. This equipment will largely eliminate the possibility of accident or injury, however, IMPACT Stunts does not warrant the protective equipment.

Participants are not required to participate in every stunt taught. If a participant feels uncomfortable performing a stunt and wishes not to participate it is their choice. Instructors will not force you to perform a stunt you are not comfortable with.

Check the box pertaining to the summer 2010 classes you wish to apply for.

- Firearms - Basic Training – August 21 - 22, 2010
- Firearms – Intermediate Techniques – August 28 – 29, 2010
- Special Effects Training – October 23 – 24, 2010

Fill out all fields of the following form:

Name: _____

Address: _____

City: _____

State: _____ Zip: _____ Country: _____

Phone: _____ Email: _____

Age: _____ Height: _____ Weight: _____ D.O.B. _____

Drivers License #: _____ Social Security #: _____

Medical Insurance Carrier: _____

Policy Number: _____

Emergency Contact: _____ Phone: _____

Secondary Phone: _____ Relation: _____

I, _____ recognize that the performing of stunts can be dangerous, resulting in injury or death, and I accept the risks associated with stunt training and performance.

I have read and understand this application form.

Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

Parent or Guardian Printed Name: _____

IMPACT STUDIOS

Production Stunts Wushu
(IMPACT Stunts Stunt Clinic)

Appearance Release

For good valuable consideration, receipt of which is hereby acknowledged, I authorize Wushu Inc. and IMPACT Stunts (“Producer” or “You”) to make use of my appearance in the following program: IMPACT Stunts Stunt Clinic.

I agree that you may tape and photograph me, and record my voice conversation and sounds including any performance during and in connection with my appearance and that you shall be the exclusive owner of the results and proceeds of such taping, photography and recording with the right, throughout the world, an unlimited amount of times in perpetuity, to copyright, to use and to license others to use, in any manner, all or any portion thereof or of a reproduction thereof in connection with the Program or otherwise.

I further agree that you may use and license to others to use and license others to use my name, voice, likeness and any biographical material concerning me which I may provide, in any and all media and in the promotion and advertising, publicizing and exploitation of the Program and/or otherwise [and ancillary products in connection with the Program] and in connection with Producer or affiliated services, through out the world in all media, an unlimited amount of times in perpetuity. I further represent that any statements made by me during my appearance are true, to the best of my knowledge, and that neither they nor my appearance will violate or infringe upon the rights of any third party.

I hereby waive any right of inspection or approval of my appearance or the uses to which such appearance may be put. I acknowledge that you will rely on the permission and waiver contained herein, and I hereby agree not to assert any claim of any nature whatsoever against anyone relating to the exercise of the permissions or waiver granted hereunder.

Name (Please Print)

Signature

Address

City

State

Zip

Date

Phone #

D.O.B.

I am a parent (or legal guardian) of the minor who has signed this release and consent and I hereby agree that said minor and I will be bound by the provisions contained herein.

Name (Please Print)

Signature

Date

Print and Fax the application and Photo Release form to: 323.932.9319

Or

Print and Mail to:

IMPACT Stunts

ATTN: Stunt Clinic 2010

1164 S. La Brea Ave

Los Angeles, Ca 90019

- Include your professional resume and demo/reel along with your application if you have one.
- Don't forget to send your deposit payment.
- Fill out this section if you wish to pay by credit card or call to pay by credit card over the phone: 323.932.8869 ask for Erik Hernandez

Cardholder's Name: _____

Card Number: _____

Card Type: _____ Expiration Date: _____ CVV2 Code: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Refund Policy

DEPOSITS ARE NOT REFUNDABLE.

Refunds must be requested. You will be refunded only if you are absent for 100% of the class in which you applied. Refunds will be forfeited if requested more than two weeks after the last day of the class pertaining to the refund.

If you are expelled from the stunt clinic you will not receive a refund.

If IMPACT Stunts cancels or postpones any class, for any reason, you are entitled to a full refund including the deposit. For such cases, IMPACT Stunts will notify applicants of such changes, along with instructions on how to proceed.

Stunt Clinic Rules

- Participants of the IMPACT Stunts Stunt Clinic must show respect to all instructors at all times. Any participant who shows an instructor disrespect will be expelled immediately.
- A response to an instructor (i.e. “yes sir/ma’am”, “thank you”, “got it”) who gives you a correction is required to show that you heard the correction. Corrections and proper communication may help to prevent injury so it is important to let the instructor know you heard them.
- Participants must treat all other participants with courtesy and respect.
- Sexual harassment will not be tolerated and offenders will be expelled immediately.
- Intentional destruction, defacement, or theft of IMPACT Stunts, IMPACT Studios, or Wushu Inc. property or equipment, as well as other participant’s personal property or equipment will result in immediate expulsion.
- Proper shoes for such training should be worn.
- Participants are required to participate as a “Safety” for each stunt. Part of learning stunts is understanding how to respond as a safety team and how a safety team should respond to you as the performer. No participants are in the stunt clinic only to learn the performance aspect.
- Participants must not force, taunt, dare, or pressure, in any way, a fellow participant to perform a stunt that that person chooses not to perform. Serious injury or death may result from such behavior. Offenders will be expelled immediately.