



**Identified Health Condition**

Global Tae Kwon Do International (GTI) has exercised its duty of care to inform me that Tae Kwon Do practise *may* aggravate my identified situation further.

It is my opinion that activities undertaken are of an acceptable risk to me and that I *do not* and *will not* hold GTI responsible for any further deterioration of my condition. If appropriate\*, I will consult my GP for a professional opinion before continuing with tuition, training or free sparring.

Name (Block Print): .....

Date: .....

Signed: .....

**\*NB** You must attach a letter from your doctor or appropriate health care professional stating that the identified health condition should not disbar you from the practise of martial arts training if:

1. You have a heart related health condition or illness.
2. Your Instructor, the GTI or any of its representatives request you to do so in order to confirm/clarify an identified health condition and/or any associated health risks linked to that condition and the practise of Tae Kwon-Do.



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