The Forge, LLC

\*\*\* ALL STUDENTS MUST REGARD AND SIGN\*\*\*

**Participants Code of Conduct**

1. Student must always show respects to all participants, guests, and instructors at all times.
2. Offensive or vulgar language is not permitted at any time.
3. Students are expected to arrive to class on time.
4. Students must leave shoes, socks, and jewelry off of the training floor unless given permission due to medical reasons.
5. No food or drink, use of tobacco products, or chewing gym in the training room.
6. No use of cell phones during class except in emergencies, after obtaining permission from the instructor.
7. When late for class, quietly kneel and wait for recognition from the instructor before joining class activities.
8. Pay strict attention to and follow instructions from instructors and disregard other distractions.
9. No sparring without permission.
10. No using equipment unless authorized by an instructor.
11. Do not talk in class except to ask a question, after raising hand and being recognized, to answer a question, or to help another student.
12. Leaving class activities or leaving the training floor while the class is in session requires permission from the instructor.
13. When sparring or in any way interacting with other students, especially if they are lower in rank, ALWAYS consider their limitations and level of strength and skill, and adjust the speed and power of your technique accordingly.
14. Students must keep their bodies clean and their fingernails and toenails clipped short, smooth, and clean uniforms are to be kept clean and in good condition.
15. Students should strive to be good representatives of The Forge, LLC, the Phoenix Karatedo Association, Kyokushinkai, and their instructors in and out of training.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ understand the Code of Conduct and rules of the Dojo, and understand that if my actions are not in accordance, that I may be asked to leave the Dojo.

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_