



REGISTRATION FORM

I wish to register my child in the **Aikido Kids Classes**. The registration fee of \$20 should be enclosed with this application.

Name: _____

Date of Birth: _____ Boy/Girl: _____

Address: _____

Home Phone: _____ Mobile Phone: _____

Email: _____

INDEMNITY – Must be signed before beginning

I understand that the practice of the martial art of Aikido has an element of danger and unpredictability and thereby involves the possibility of permanent and serious physical injury. In consideration of the right for my child to participate in training classes conducted by APlus Pty Limited for Aikido Australia Pty Ltd and the Takemusu Aiki Association Inc., I acknowledge and agree to assume all of the risks inherent in such practice and to hold the organisations and people involved; Takemusu Aiki Association Inc, Aikido Australia Pty Ltd and APlus Pty Limited, and their instructors, servants and agents free from any and all liability, claim or demand, no matter how caused, whether by or through their negligence, for any injuries and/or expenses, and to indemnify them from all claims arising from my son/daughters participation in these classes.

Medical Notification and Release:

My child has the following illness, disability or injuries that could place him/her at risk during classes:

Notwithstanding this, I agree to assume the risk of his/her injury/injuries being aggravated and to indemnify Aikido Australia Pty Ltd, Takemusu Aiki Association Inc and APlus Pty Ltd, and their instructors, servants and agents for any claim for liability with respect to this, or any other loss or injury/injuries he/she may sustain, no matter how caused.

Signature: _____ Date: _____

of Parent or Legal Guardian