

AIKIDO BEGINNERS COURSE

TAX INVOICE ABN 69 003 190 190

REGISTRATION FORM

I wish to register for the next **Aikido Beginners Course** in self-protection techniques and enclose a cheque made out to APlus Pty Limited for \$60 (inc. GST).

Name: _____

Address: _____

Phone: _____ Email: _____

Payment of Fee

PAID by Cheque Cash \$ _____

To: _____ Date: _____

RISK WARNING

for the purposes of the Civil Liability Act 2002 (NSW)

I understand that the practice of Aikido, like any combative art designed to maim and injure, has an element of danger and unpredictability and thereby involves the possibility of permanent and serious physical injury. I recognise that I am not required to perform any techniques or participate in any practice that I consider to be unsafe, in which case I agree to notify the instructor immediately of my concerns.

INDEMNITY

In consideration of the right to participate in this training programme, 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 that I may make, arising from my participation in this course.

Medical Release:

I have the following illness, disability or injuries that could place me at risk during the training:

Notwithstanding this, I agree to assume the risk of such 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 I may sustain, no matter how caused.

Signature: _____ Date: _____

parent if under 18