## Still Point Aikido Seminar March 28 & 29 Registration Form

## Waiver and Release:

I (*please print full name*), \_\_\_\_\_\_\_, wish to participate in Aikido training offered by Still Point. In consideration: I acknowledge aikido is a martial art is a contact physical activity involving throwing and/or restraining techniques practiced through application of force and/or leverage to various parts of the body, including, but not limited to, the joints. Practicing these techniques involves falling or rolling with varying degrees of force or momentum.

I acknowledge that, while every effort will be made to provide a safe training environment, and while risk of serious injury is minimal, there nonetheless remains a possibility of serious physical injury, long or short term disability resulting from such training or practice. Notwithstanding, I choose to participate and assume all risks to person or property possibly associated with the stated and associated activities.

Specifically, for myself, my heirs, administrators, personal representatives or assigns, I release, remise and discharge Still Point, Hancock Recreation Center, Austin Parks and Recreation Department, and any and all sponsors, facilitators, or owners of premises, activities, or equipment, their respective agents, servants, officers and officials, and all other participants in the activity of and from all claims, demands, actions and causes of action of any sort, for injuries to my person or property during my presence at, or participation in, the stated activities due to negligence or any other fault. I understand neither Still Point nor any associates of Still Point are liable for the action or actions of any individual participant or spectator.

I consent to allow Still Point to photograph, video or audio-record my image and/or voice. I grant to Still Point the rights to use, reproduce, assign, and/or distribute my image, voice, name and/or likeness in any media whatsoever for any educational, promotional and/or commercial purpose, at sole discretion, of Still Point without consideration of payment to me. Still Point and its successors and assigns shall own all right, title and interest, including the copyright, to any such photograph, video, or audio recording.

I certify that I am at least eighteen (18) years of age or, if under age 18, have the permission of my parent or guardian to participate in this activity and that they have full knowledge of all details.

Signature of Participant or Legal Guardian	Date
<ul> <li>I will be attending the following Sessions (Check all that apply):</li> <li>Saturday 1:00 - 3:30</li> <li>Saturday 4:30 - 6:30</li> <li>Sunday 1:30 - 3:30</li> </ul>	<ul> <li>I understand that this fundraising event is offered free to the public, and no fees will be collected during the event. However, I wish to support the activities of Aiki-Extensions, Inc. and am sending a donation at this time (suggested donation: \$50.00.</li> <li>Yes (<i>Checks payable to Aiki-Extensions</i>)</li> <li>No</li> </ul>
<u>Contact Info</u> :     Day phone: Night phone: Emergency Contact: Name	Email: Phone:
Send Registration Materials to: Still Point • 1506 Brushy View Cove, Austin TX 78765	