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Aikido Yuishinkai – Melbourne Dojo’s

Enquires: 9815 3388 (Catherine) 0414 808 442 (Colin)
Email: aikido@aikicentre.com.au

Seminar Registration Training Seminar in Melbourne with Yoshitake Hashimoto Sensei

Name: _____
Address: _____ Post Code _____ State: _____
Home Ph. _____ Work Ph. _____ Mobile. _____
Email: _____@_____
Emergency Contact: _____ Phone: _____
Aikido Yuishinkai Dojo: Bentleigh Newport Hawthorn
Other Aikido Style? Style Name: _____ Dojo: _____

How long have you been training and current rank? _____
Please note you may be required to complete health and indemnity information prior to participating in the seminar, Please ensure your instructor has your information.

I wish to register for the Hashimoto Sensei Training Seminar 18-19 July 09:
 Full Seminar (3 sessions) @ \$90 (\$84- Teens/Secondary School Students)
 Individual sessions @ \$40 per session.
I will attend: Saturday (morning) Saturday (afternoon) Sunday

Total Registration Due \$ _____

PAYMENT METHOD

Cash Cheque Direct Credit to Bank A/C

Direct Credit to Bank Account: **BSB 033063 Account # 176442**
Westpac Account Name: Aikido Yuishinkai Bentleigh
(Indicate your surname as reference)

Cheques / Money Orders: **Payable to: Aikido Yuishinkai Bentleigh**

INDEMNITY Please read the following statement carefully before signing below.

If in the case that I am unable to consent to my receiving emergency medical treatment as may be deemed necessary including ambulance transport, I authorise the instructor in charge to consent to such treatment on my behalf. Further I will reimburse and indemnify Aiki-Centre & Aikido Bentleigh Dojo’s for any expenses incurred and not covered by insurance.
Initial _____

I hereby recognise that training in the martial art of Aikido could by its nature produce serious and permanent injury or death and realise that a careful and responsible approach to training is required at all times to minimise the risk of injury. I acknowledge that any injury, no matter how caused, through participation in martial arts training with Aiki-Centre & Aikido Bentleigh Dojo’s that no liability, neither tortuous nor contractual, will attach to any of the instructors, assistant instructors or participants in the said group. **I participate in the Y. Hashimoto Aikido seminar entirely and absolutely at my own risk.**
Initial _____

I also acknowledge that Aikido seminars present different training conditions and risks, these include training environment, ie. mat surface, teaching approach by guest instructors and capacity of other seminar participants. I agree to train with care and consideration of these differences.

I have read and agree to abide by the conditions of participation. **Initial** _____

Name: _____
Signature: _____ Date: ____/____/____