# Redlands Aikikai Registration Form

**Please read carefully before signing.** An individual registration form must be completed by each participant.

**Enrolling in (Circle):** **Aikido** **Kendo** **Kenjitsu** **Other**_____

**Name** **Date of Birth**

**Address**

**City** **State** **Zip Code**

**Phone Number** **Email Address**

**Emergency Contact: Name/Phone Number**

**Do you have any allergies, physical limitations, medications or medical conditions of which the dojo should be aware with regard to your safety while training or the safety of others?** If these limitations may affect your training or the training of others, you are responsible for making the class instructor aware of them.

**Circle one:** Yes No

If yes, please explain briefly:

## REDLANDS AIKIKAI CONSENT & ASSUMPTION OF RISK STATEMENT

1. I acknowledge that Redlands Aikikai carry no insurance against liability for injury to any of its students or persons present in Redlands Aikikai (hereafter referred to as Aikikai).I agree that before using the mat or any equipment at Redlands Aikikai, I will inspect the facilities and equipment I use, and if I believe anything is unsafe, I will immediately advise the instructor present and will refuse to participate in training any further. For the purpose of this agreement, “Redlands Aikikai” includes the parking lot and common areas surrounding the facility or any area where training is taking place.
2. I agree that I know and understand and will follow all safety procedures in using equipment and training weapons at Aikikai. I agree that at no time will I bring steel swords or other non-training weapons to Aikikai training area (herein referred to as the training area) without the express written consent of the Aikikai’s chief instructor Dr. Chetan Prakash. If there is any question as to what proper safety procedures are, I will specifically ask Dr. Prakash or the instructor at the training area.
3. I have been advised not to attempt any skill level in training or any other activity of which I am not fully capable. I realize that the study of martial and meditative arts (henceforth “M&MA”) requires proper conditioning and training.
4. I fully understand that:
A. There are risks and dangers associated with M&MA training but not limited to bodily injury, communicable diseases, partial or total disability, paralysis and death. In accordance with the law, Redlands Aikikai does not exclude individuals with medical conditions that do not pose a medically recognized threat to the health or safety of other students in the normal course of training. I understand that there are some

unavoidable circumstances where these conditions may require special caution on my part to minimize danger to myself or others, and I acknowledge that it is my responsibility to act accordingly.
B. In particular, I understand that some students may be infected with diseases, such as HIV/AIDS or Hepatitis-B, which can be transmitted by exchanges of blood or other body fluids and that I may be training with them. I acknowledge that I have read and will follow explicitly the Redlands Aikikai Blood and Body Fluid Borne Pathogen Policy, a copy of which is attached to and incorporated in this Release, Consent and Assumption of Risk Statement.
C. There are social and economic losses and damages which could result from those risks and dangers described above and which could be severe.
D. These risks and dangers may be caused by my negligence, the negligence of my training partner, or the negligence of others around me who are training or doing any other activity, or by the negligence of Redlands Aikikai or other agents or instructors of Redlands Aikikai.
E. There may be other risks not known or foreseeable at this time which could arise.
5. I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISKS OF DEATH, ILLNESS, OR INJURY SUSTAINED WHILE PARTICIPATING IN OR OBSERVING MARTIAL AND INNER ARTS AT REDLANDS AIKIKAI, WHETHER OR NOT CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES DESCRIBED IN SECTION 7 BELOW.
6. I accept and assume all such risk and responsibility for all loses and damages following any such injury, illness, disability, paralysis or death, however caused or alleged to be caused including injuries caused in while or in part by the negligence of Redlands Aikikai, its representatives, agents, employees, instructors, or other participants, or owners or lessees of the premises, including their officers, directors, agents and employees.
7. I release Redlands Aikikai, Dr. Chetan Prakash and other instructors, agents, guest instructors, employees of, and all individuals associated with, Redlands Aikikai and with owners and lessees of the premises, including their officers, directors, agents, and employees from any and all liability, claims, demands or actions whatsoever arising out of the damage, loss or injury to me while upon the Aikikai premises or while participating in M&MA training or any other activities at Redlands Aikikai and contemplated by this agreement, whether such loss, damage, or injury results from negligence or otherwise.
8. I agree that this Release, Consent and Assumption of Risk Statement covers each and every time that I train or otherwise participate in any activity, listed or unlisted, at Redlands Aikikai or at any other location sponsored by Redlands Aikikai, its agents, employees or instructors.
9. I agree that I WILL NOT SUE OR MAKE A CLAIM AGAINST the released parties as the result of my participation at Redlands Aikikai or at any other location where training takes place.
10. I agree to INDEMNIFY AND HOLD HARMLESS THE RELEASED PARTIES from all claims, judgments, and costs including attorney's fees incurred in connection with any action brought as a result of my participation in any activity at Redlands Aikikai.
11. I understand that Martial and Meditative Arts is an educational system. I agree to strictly abide by the posted training rules of Redlands Aikikai and to follow explicitly all instruction given by instructors during the course of my training. I agree to watch out for others in the training area and while training on the mat to follow all rules posted and otherwise explained to me. Should I break any of these rules, I understand that it is the decision of Dr. Prakash whether or not I may continue training. I will abide by this decision.
12. By signing this agreement I am stating that I know what I am doing, that I take responsibility for my own acts, that I have read carefully and understand this agreement and that I am responsible for myself and will be considerate of others. I am aware that I may have the agreement reviewed by legal counsel.
13. I understand that this Release, Consent and Assumption of Risk Statement is in effect from the moment I arrive until the moment I leave Redlands Aikikai, even if I am not training when something happens.
14. I have read and understood, and agree explicitly follow the Redlands Aikikai Blood and Body Fluid Borne Pathogen Policy which I attached and incorporated as if it is fully written out in the body thereof, to this Release, Consent and Assumption of Risk Statement.
15. If any potion of this agreement shall be held to be invalid, illegal or unenforceable to any extent and for any reason by any Court of competent jurisdiction, the remainder of this agreement shall not be affected and shall be enforceable to the full extent permitted by law.

I make this agreement on behalf of myself, my heirs, successors, executors, estate, and dependents. By signing this form I am asserting that I am _____ years of age, and that I am an adult.

Participant's Name (If Minor, Guardian's Name) - Printed | Participant's or Guardian's Signature | Date

## For Parents or Guardians of Minors

1. We the parents or legal guardian(s) consent to allow this minor individual to participate in Martial and Meditative Arts Training at Redlands Aikikai, or at any other location at which Redlands Aikikai may be offering training. We will instruct the minor that he or she must inspect the facilities or equipment to be used, and if he or she believes anything to be unsafe, he or she will immediately advise the class instructor and will refuse to participate further in training.
2. We have read and understood each of the foregoing paragraphs and intend to bind ourselves, the minor, and all heirs, successors, executors, the estate, and dependents of said minor, to the terms hereof.
3. We agree to hold Redlands Aikikai, Dr. Chetan Prakash and other instructors, agents, instructors, employees, and all individuals associated with Redlands Aikikai harmless from any action brought as a result of participation by this minor in any activity of Redlands Aikikai and promise to indemnify Redlands Aikikai and all releases for all liability and losses including attorney's fees occasioned by a claim by, on behalf of or on account of injuries or illness to said minor, and to fully indemnify all such losses.

Guardian's Name (Printed) | Guardian's Signature | Date