

美國道家太極拳社

Taoist Tai Chi Society of the United States of America, Inc. 911 Bryan Road Brandon, Fl 33511

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A Charitable Organization

Workshop/Program Registration Form

Program Name: __Brandon Grand Reopening and International Workshop Date:_May 25 - 27, 2012__

Personal Information		
First Name	Last Name	☐ Male ☐ Female
Street Address	City	State Zip
Primary Phone Home Work Cell	Secondary Phone Home Work Cell	Email
Emergency Contact Name, Relationship, and Te	llephone Number	
Instructor	Branch and Location Name	
☐ Beginner ☐ Continuing		
Arrival and Departure		
Travel Mode	Arrival Date and Time	Departure Date and Time
OWN CAR Other		
AIRLINE	Airline Name: Flight #:	Airline Name: Flight #:
☐ PICK UP / DROP OFF REQUEST	☐ I would like to be picked up	☐ I would like to be dropped off
Accommodation		
☐ Billeting/Housing Needed ☐ For Dates of Arrival and Departure ☐ Other:		
Special requirements due to health reasons. (Please explain):		
Participant" in, on or about the premises of The below "Named Participant equipment therein, does so at his or her ow The below "Named Participant' herself in, on or about the premises of the does hereby fully and forever release and demands, damages, rights of action, or continuously unanticipated, resulting from or arising of facilities and equipment thereof, including negligence of the Taoist Tai Chi Society, said premises including other persons using In consideration of my instruction.	of the Taoist Tai Chi Society or location of the ", in attending the above " Named Program risk." assumes full responsibility for any injuries Taoist Tai Chi Society branches or location of discharge said Society, its master, its instructions of actions present or future, whether the of the below "Named Participant's" use of but without limitation, any claims for person its master, its instructors, and its agents or the said premises, whether they be member, on in Taoist Tai Chi and meditation, I und	ram" and using the exercises, facilities and so or damages which may occur to himself or of the above "Named Program" and he or she actors, and its agent from any and all claims, he same be known or unknown, anticipated or or intended use of the said Society's exercises, had injuries resulting from or arising out of the he negligence of any other persons present on
Signature of Named Participant		Date