

AIKIDO TENDOKAI
www.aikidotandokai.com

JCCC AIKIKAI
www.jccaikikai.ca

welcome

HAYATO OSAWA SHIHAN

The New Technical Director of the Canadian Aikido Federation

location

**JAPANESE CANADIAN
CULTURAL CENTRE, Don Mills, ON.
SEPTEMBER 24TH & 25TH, 2011**

FEES				TENTATIVE SCHEDULE*							
ATTENDING	AT THE DOOR		PRE-REGISTERED		SAT. SEPT. 24 TH		SUN. SEPT. 25 TH				
	ADULT	YOUTH	ADULT	YOUTH							
One Day (Saturday)	\$90	\$60	n/a	n/a	9:30–10:00	Registration	9:30–10:00	Registration			
One Day (Sunday)	\$60	\$40	n/a	n/a	10:00–11:00	Class	10:00–10:50	Class			
Two Days	\$120	\$80	\$100	\$70	11:15–12:15	Class	11:00–12:00	Class			
PLEASE NOTE: Youth students are from 12 to 16 years old. Children under 12 may practice at no charge, on Sunday, 12:10pm – 1:10pm.						12:15–2:00	Lunch	12:10 – 1:10	Class		
								2:00–3:00	Class		
								3:10–4:10	Class		
								4:15–	Tests		
						TBA	Dinner				

* Please note - due to space constraints, the Saturday class may be divided into two different groups, kyu and black belts.

- Tests - 1st kyu and up, CAF members only. 1st kyu tests may be held on Sunday, depending on the number of test candidates.
- To the chief instructors of CAF dojos: Please send Yumi Nakamura at aikido@rogers.com the names of test candidates by September 16th. Note that no new candidates will be accepted for testing after that date.

The Annual General meeting of the Ontario Federation is scheduled to be held during the seminar.

PREPAYMENT FORM (use one form per registration)

Seminar with Osawa Shihan, sponsored by JCCC Aikikai and Aikido Tendokai, to be held at the J.C.C.C. dojo, 6 Garamond Court, Don Mills, September 24–25, 2011. *The deadline for prepayment is September 10th.* Please return this form, the waiver and your cheque (Cheques should be made payable to *Aikido Tendokai*) to:

Aikido Tendokai c/o Yumi Nakamura, 28 Unity Rd., Toronto, ON, M4J 5A4, Canada

Family Name: _____ Given Name: _____ () M () F

Address: _____

City: _____ Province: _____

Postal code: _____ Phone: _____

Email Address: _____

Dojo: _____

Rank: _____ Sensei: _____

PREREGISTRATIONS ARE DUE BY September 10, 2011

FEES: CHECK ONE BOX

PRE-REGISTERED

ADULT

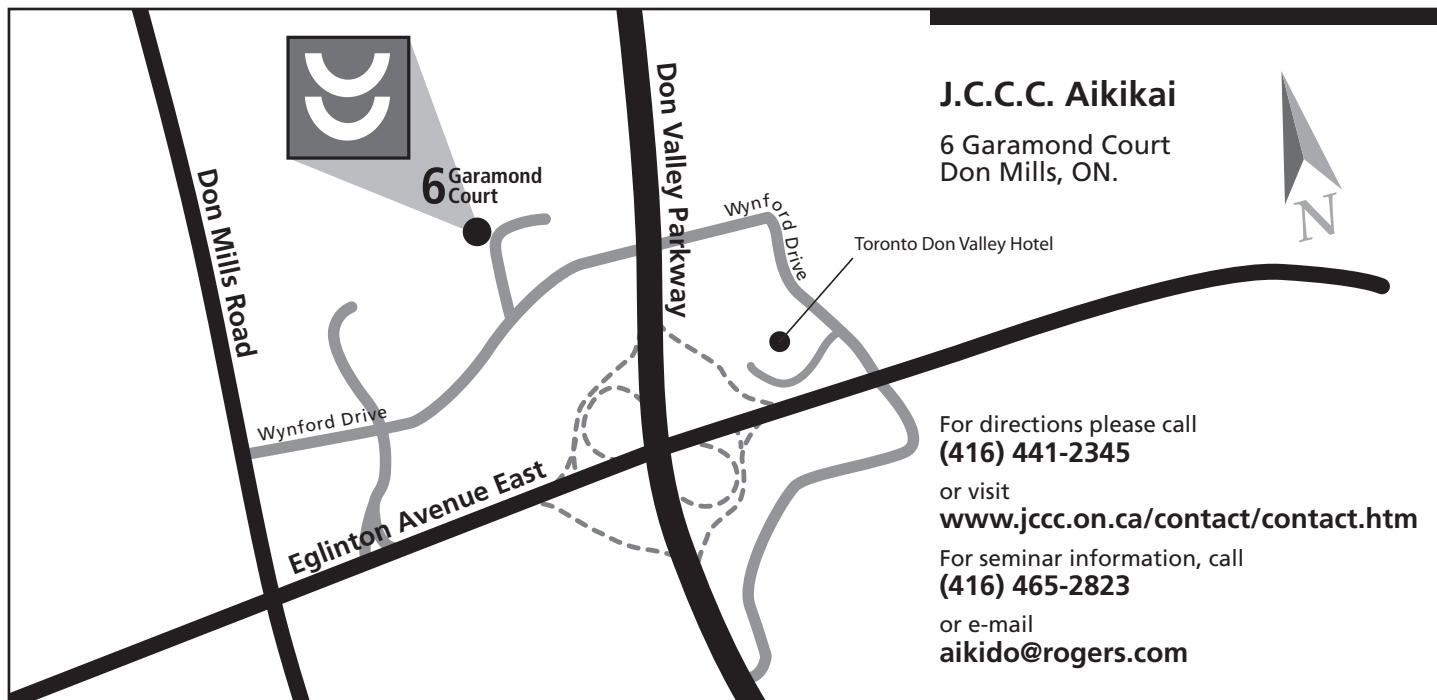
YOUTH

Two Days

\$100

\$70

You may detach the map below for your reference.



Accommodations:

Toronto Don Valley Hotel. Phone 416-449-4111 or 1-877-474-6835; on line, www.torontodonvalleyhotel.com.

Before September 9th, Group code "JAI"

Double = \$99, plus tax. Two double beds; legally you bring sleeping bags for additional people and pay following price.

Triple = \$109, Quad = 119 plus tax.

- Guests rooms in condos (limited numbers available)-Please contact Yumi, aikido@rogers.com by **September 16th** \$75/night, not including tax. – double occupancy. An additional two persons could be accommodated with sleeping bags.
- You can stay at the North York dojo (about a half-hour drive away from the J.C.C.C.) in your sleeping bags. You will need your own transportation to and from the dojo. No fee. Contact aikido@rogers.com

Seminar sponsored by
J.C.C.C. Aikikai and Aikido Tendokai

WAIVER & RELEASE OF LIABILITY

By signing this form you give up important legal rights.
Please read carefully!

This is a binding legal agreement. As a Participant in the programs, activities and events of the 2011 OAF Seminar sponsored by Aikido Tendokai and J.C.C.C. Aikikai, the undersigned acknowledges and agrees to the following terms.

Disclaimer

The 2011 OAF Seminar, Aikido Tendokai, J.C.C.C. Aikikai, the OAF and/or the Canadian Aikido Federation, their directors, officers, members, employees, independent contractors, instructors, coaches, volunteers, officials, participants, clubs, agents, sponsors, funding partners, owners/operators of the facility, and representatives (the "Organization") are not responsible for any injury, damage or loss of any kind suffered by a Participant during, or as a result of, any program, activity or event, caused in any manner whatsoever including, but not limited to, the negligence of the Organization.

Description of Risks

In consideration of my participation in such programs, activities and events, I hereby acknowledge that I am aware of the risks and hazards associated with or related to the sport of Aikido and that they may result in personal injury, death, property damage, expense and related loss to me. I understand that Aikido training is practiced without protective clothing or equipment and involves many inherent physical risks. These include, but are not limited to, injuries resulting from:

- Ongoing physical contact with the instructor and other students;
- Striking objects with parts of the body;
- Executing strenuous and demanding physical techniques;
- Collisions with the wall, floor, other students and instructors;
- Extreme changes in temperature;
- Tumbling, falling or being thrown to the floor;
- Strenuous cardiovascular workouts;
- Exerting and stretching various muscle groups;
- Executing self-defence escapes and techniques;
- Dehydration;
- Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities.

Initials: _____

Furthermore, I am aware:

- That injuries sustained in Aikido can be severe;
- That I may come into close contact with other participants, including the possibility of accidental and unexpected touching;
- That I may experience anxiety while challenging myself during the activities;
- That my risk of injury is reduced if I follow all rules adopted during training and competition; and
- That my risk of injury increases as I become fatigued.

Release of Liability

In consideration of the Organization allowing me to participate, I agree:

- a) To assume all risks arising out of, associated with or related to my participation;
- b) To be solely responsible for any injury, loss or damage that I might sustain while participating; and
- c) To release the Organization from liability for any and all claims, demands, actions and costs that might arise out of my participating, even though such risks, injuries, loss, damage, claims, demands, actions or costs may have been caused by the negligence of the Organization.

Acknowledgement

I acknowledge that I am physically fit to proceed with this type of vigorous training, that I have read this agreement, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

Name of Participant (Please print)

Signature of Participant (or Guardian if under 18)

Date