

RAI UN KAI
SEMINAR REGISTRATION AND
WAIVER

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Thank you for attending a seminar hosted by Rai Un Kai, the Thunder Bay Iaido and Jodo club!

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This form contains both the Physical Activity Readiness Questionnaire, and our release form. Please read both carefully, sign, and date this form.

Participant Information:

Name: _____

Street Address _____

City _____

Postal _____

Phone _____

Email: _____

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Thunder

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Club / School

Revised Physical Activity Readiness

Questionnaire (rPAR-Q)

Par-Q is designed to help you help yourself. For most people, physical activity should not pose any problem or hazard. PAR-Q has been designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them. Common sense is your best guide in answering these few questions. Please read them carefully and check the box that is appropriate for you.

Yes No

- Has your doctor ever said you have a heart condition and recommended only medically approved physical activity?
- Do you have chest pain brought on by physical activity?
- Have you developed chest pain in the past month?
- Do you lose consciousness or lose your balance as a result of dizziness?
- Do you have a bone or joint problem that could be aggravated by the proposed physical activity?
- Is your doctor currently prescribing medication for your blood pressure or heart condition?
- Are you aware, through your own experience or a doctor's advice, of any other reason why you should not exercise without medical approval?

NOTE: If you 1) answer YES to any question, or 2) are pregnant, or 3) are 70 years of age or older, consult your doctor before increasing your physical activity level. Failure to do so may increase your injury/health risk. If you have a temporary illness, postpone physical activity level. Failure to do so may increase your injury/health risk. If you have a temporary illness, postpone physical activity.

Release Form

Please read the following carefully:

I, the undersigned seminar participant understand that I am applying for instruction in Iaido, Jodo and related martial arts, activities which involve physical activity, and which entail the risk of injury.

I accept and assume all such risks, dangers and hazards, for any and all injuries that I may suffer, or be caused to suffer by others, out of the participation in the activities, or use of the facilities available. I further acknowledge and accept my responsibility to provide my own personal health, medical, dental and accident insurance.

I hereby release and hold harmless my instructors, co-participants, Targeted Initiatives Incorporated (the operating entity of Rai Un Kai), its officers, directors and associated persons from any and all actions, claims and demands for damages or loss as a result of my participation in the above mentioned activities.

Signature of Participant (parent or guardian where participant is under 18 years of age)

Date of Signature