

Registration Form – AIKI-Based Body Awareness Training for TRAUMA WORK & PEACEMAKING, July 8-13, 2016 & January 12-17, 2017

Please mail or email completed form and full payment to **Paul Linden, 221 Piedmont Road, Columbus, OH 43214**
paullinden@aol.com

Full payment must accompany registration form (online payment or check).

\$850 early bird registration by June 1, 2016

\$1200 after June 1, 2016

Please note that you are not registered for this workshop until payment in full is received. After June 15, contact paullinden@aol.com to be sure that space is still available. People from outside North America may be eligible for a discount - please contact paullinden@aol.com for details. If you cancel your registration after June 15, 2016, there will be a non-refundable fee of \$450.

Name

Address

City, State, ZIP, Country

Phone / Cell Phone Email

Martial arts experience? Which, and for how long

Bodyworker, or Psychotherapist?

Do you have any medical or psychological condition that would interfere with full and safe participation?

What do you hope to gain from this workshop?

READ THE FOLLOWING CAREFULLY - IT LIMITS OUR LIABILITY

I, the undersigned student at COLUMBUS CENTER FOR MOVEMENT STUDIES/AIKIDO OF COLUMBUS (hereafter called "School"), acknowledge that I am applying for instruction in a Movement Studies/Aikido involving strenuous exercise and personal body contact. I acknowledge that any insurance that the School may carry may not cover injury. I do hereby hold the School, the instructor Paul Linden, employees, volunteers, contractors, and agents harmless from any and all liability (including attorney's fees and costs) for all claims, actions, or damages due to injuries suffered by me or caused to third parties by me, arising out of activities involving Movement Studies/Aikido, or any variation thereof, whether occurring on the premises of the School or elsewhere, excepting only those claims, actions, or damages caused by their gross negligence or willful misconduct. I agree to abide by the rules of the School and to follow explicitly all instructions given by the instructor. I understand that (a) training is a privilege, (b) the School may refuse to provide instruction or membership to any person at any time, and (c) fees paid may not be refundable. I agree to receive communications at the above addresses from the School and I agree that the School may use any photos or images of me taken at the seminar. I agree (1) not to bring or consume any recreational drugs (including alcohol) during the workshops in Columbus, (2) not to take any video images of the seminar.

Signature

Date