



CTCA Duncan/Chemanius 2024 Tai Chi Western Regional Workshop Registration Form

Saturday April 20th & Sunday April 21st, 9:30 - 3:30
Heritage Hall at the Cowichan Community Centre (CCC)
2687 James St, Duncan BC

Complete form by clicking text fields to fill in. Select dietary preference if other than Regular.
Save completed form on your computer, then email to: cowichanvalleytaichi@gmail.com

Name: _____

Province: _____ Postal Code: _____

Email: _____ Phone: _____

Emergency Contact Name: _____ Phone Number: _____

I am a CTCA member: CTCA location: _____

Medical Concerns (if any): _____

*Out of town participants please contact cowichanvalleytaichi@gmail.com for accommodation information.

Register/Payment by email: Complete this form and email to cowichanvalleytaichi@gmail.com

For payment, e-transfer \$90 to cowichanvalleytaichi@gmail.com

Choose dietary preference: Regular Vegetarian Vegan Gluten Free

Voluntary Release and Waiver

I, _____ (print name), in consideration of my participation in activities of the Canadian Tai Chi Academy, hereby assume all risks for such involvement, for myself, my spouse, heirs, legal representation and assigns. I release and discharge the Canadian Tai Chi Academy, its affiliates, agents, officers and employees, from all liability, claims, demands, actions, and causes of action whatsoever, whether known, or unknown, arising out of or relating to any loss or damage that may occur either directly or indirectly from my participation in such activity. I enter into the voluntary release ad waiver willingly and with full knowledge and understanding that by my signature below, I am expressly releasing the Canadian Tai Chi Academy from any liability arising from instruction or use of facilities and equipment, while engaging in the Academy's activities.

Signature: _____ Date: _____

(Note: can be signed at start of workshop)