



2<sup>nd</sup> Half Of Sword Set Workshop  
Newmarket, Ontario  
Saturday & Sunday April 5<sup>th</sup> & 6<sup>th</sup>, 2025  
Registration and Waiver Form

Name: \_\_\_\_\_  
(first) (last)

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Mobile Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

E-mail Address: \_\_\_\_\_

I am a CTCA Member  CTCA Club Location: \_\_\_\_\_

Designate dietary concerns for lunches : \_\_\_\_\_

Option Dinner Spicy Island Restaurant 1065 Davis Drive Newmarket, Ontario

e-mail registration to: CTCANewmarketWorkshops@gmail.com

Workshop Cost includes Lunch: \$150.00 for CTCA Members, \$250.00 for Non Members.

You can Pay by:

e-transfer: CTCANewmarketFees@gmail.com (*mention Newmarket Sword Workshop*)

Cash or cheque, payable at club or at the door to: **Canadian Tai Chi Academy**

### Voluntary Release and Waiver

In consideration for me being permitted by the Canadian Tai Chi Academy to participate in Tai Chi,

I \_\_\_\_\_ (**print name**), for myself, my spouse, heirs, legal representatives and assigns, hereby assume all risks for such involvement, and 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 this VOLUNTARY RELEASE & 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.

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_