

NIAGARA KYUDO INTENSIVE

Registration Form

Name: _____		
Address: _____		
City: _____	Prov/State: _____	Postal Code: _____
Phone # _____	E-mail: _____	

Please select all appropriate boxes:

- I am registering for the 'First Shot' beginners program.
- I have already taken the 'First Shot' program.
- I do not have my own equipment and will require the use of course equipment for the program.
- \$100.00 registration fee enclosed. *(Received prior to June 30, 2006)*
- \$125.00 registration fee enclosed. *(Received July 1 – September 9, 2006)*
- \$200.00 registration fee enclosed. *(Received after September 9th, 2006)*

****PRE-REGISTRATION REQUIRED SPACE IS LIMITED****

Registration Forms and Fees to Dayman Perry: 5189 Jepson St.
Niagara Falls, ON
Canada
L2E 1K9

Cheques payable to Dayman Perry. Please list 'kyudo' in the memo field.

PLEASE READ THE FOLLOWING CAREFULLY

I, the undersigned applicant to the Niagara Kyudo Intensive understand that I am applying for instruction in Japanese Archery, an activity that involves physical activity. I further understand that Tokumeikan carries no insurance against injury to any of the participants in the seminar. It is recommended that all participants consult a physician prior to taking part in the Niagara Kyudo Intensive.

I hereby acknowledge that I am assuming the risk and responsibility for any and all injuries suffered by me, or caused by third parties to me, arising out of the practice or during the use of any of the facilities available. I further acknowledge that I am responsible for providing my own personal health, medical, dental and accident insurance coverage. I hereby release Dayman Perry, Tokumeikan, Phil Ortiz, Toko Kyudojo, Zenko International, its instructors and all associated persons from liability for any injury or loss suffered by me.

Name: _____ Signature: _____
Please Print

Date: _____ Parent/Guardian: _____
Under 18