JI HONG WU SHU & TAI CHI COLLEGE

(operated by JI HONG INTERNATIONAL STUDIES SERVICES LIMITED)

11203 – 105 Avenue, Edmonton, Alberta, Canada T5G 3M4

**COURSE REGISTRATION FORM**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Chinese Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if applicable)

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

(Street Address / Municipality (city, town etc.) / Postal Code)

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Male: ⁭ Female: ⁭ Adult: ⁭ Under 18: ⁭ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Age)

Registering for Martial Arts Activities in: Wushu □ Tai Chi □ Health Qigong □ San Shou □

I HEREBY AGREE TO ABIDE BY THE RULES AND REGULATIONS PROMULGATED BY THE JI HONG WU SHU & TAI CHI COLLEGE (“COLLEGE”) FROM TIME TO TIME.

**WAIVER AND RELEASE**

**I, THE UNDERSIGNED, HEREBY COVENANT AND AGREE:**

1. 1373532 Alberta Ltd., owner of the property at #219, 9148 23 Avenue, Edmonton, Alberta (“Subject Premises”), and JI HONG INTERNATIONAL STUDIES SERVICES LIMITED, operating as Ji Hong Wu Shu & Tai Chi College (“the College”), and their respective directors, officers, instructors, agent and employees, **shall not be held liable** in any way or manner:
   1. for the death or injuries of whatever nature and kind and howsoever suffered by me or my children as a direct or indirect result of:
      1. the use of the said premises by me or my children, whether as a student of the College, or as parent of the student, spectator, visitor, licensee or invitee; and
      2. the omission or negligence of 471691 ALBERTA LTD. and Ji Hong International Studies Services Limited, their respective directors, officers, instructors, agents and employees in the maintenance, care and operation of the Subject Premises;
   2. for the loss of or damage to any property incurred or suffered by me or my children while in attendance of the Subject Premises, whether as a student, parent, spectator, visitor, licensee or invitee;
   3. for any damage, injuries, personal discomfort, illness or death suffered or sustained by me or my children as a direct, indirect or consequential result of:
      1. the instructions given to me or my children by the College, its instructors and agents, in the training of Wu Shu, Tai Chi, weapons, long and short, sparring and push-hand, or any other forms of athletic, gymnastic and martial art exercises (collectively the “Training”); or
      2. the omission or negligence of the College, its directors, officers, instructors and agents, in the course of providing Training to me or my children.
2. **AND I HEREBY RELEASE ACQUIT AND FOREVER DISCHARGE 471691 ALBERTA LTD. and JI HONG** **INTERNATIONAL STUDIES SERVICES LIMITED operating as JI HONG WU SHU & TAI CHI COLLEGE** (the “College”), their respective directors, officers, instructors, agents and employees (collectively “the Releasee”), from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action, suits, debts, dues, sums of money, expenses, general damages, special damages, subrogated claims, costs, claims and demands of any and every kind and nature whatsoever, at law or in equity, or under any Statute, including claims under the Alberta Hospitals Act and Workers’ Compensation Act, if any, against which the said Releasee, or any of them, I ever had, now have, or which I or my heirs, executors, administrators, assigns or agents, hereafter can, shall or any have, for or by reason of any matter, cause or thing whatsoever existing up to the present time, and in particular, but without restricting, for or by reason of any claim for injuries or death or damages to person or property, including all expenses therefrom, including solicitor-client costs, which I might have by reason of or arising out of or connected in any way with or in consequence of,
   * 1. the use of the Subject Premises in any way or manner by me or my children;
     2. the omission or negligence of the Releasee in the maintenance, care and operation of the Subject Premises; and
     3. the omission or negligence of the Releasee in the course of provision of Training to myself and my children.

**AND I DO HEREBY WAIVE** all my rights, whether in law or in equity, against the said Releasees or any one of them, for any injuries, loss or death suffered by me or my children as a result of the aforesaid.

1. **AND I ACKNOWLEDGE THAT:**
   1. I am cognizant of and have been sufficiently informed by the College of the risks that may be involved in the said Training, and I further acknowledge that the participation in such Training by myself or my children may or might cause injury, loss, damage or death to myself, my children, or others; and
   2. the College, its instructors and agents, are not responsible in any way for supervising any students who are under 18 years for their safety and security when such students are not participating in the Training but remaining at large on the Subject Premises while training of other students is proceeding.
   3. I voluntarily assume all such risks, responsibilities and liabilities as a result of my or my children’s participation in the Training, or as a result of my or my children’s attendance at the Subject Premises, which said risks may or might cause injury, loss or death to myself, my children or others.
   4. and I warrant that I am in good health, of sound physical and mental condition with no medical conditions, existing or pre-existing, and free of any physical defects, impairment, or any physiological condition that may be aggravated by my engaging in such Training; or, if I am not in good health, or I am not of sound physical and mental conditions with existing or pre-existing physical, physiological or mental defects or impairment, I acknowledge that my participation in the Training would aggravate my existing mental, physical and physiological condition, and I voluntarily assume all the risks as a result of my participation of the Training.
2. AND I ACKNOWEDGE that:
   1. my enrolment at the College for the said Training evidenced by this Registration Form is good and sufficient consideration of the Release and Waiver;
   2. this Release and Waiver is binding on me, my heirs, successors and assigns so long as I remain a student at the College.

I HAVE READ AND FULLY UNDERSTOOD THE ABOVE.

DATED at Edmonton, Alberta, this day of , 201 .

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Registrant Signature of Parent or Guardian of Registrant