

## Golden Phoenix Tai Chi Cairns Australia Julie M Hutchin/Sifu

I, the undersigned applicant, hereby apply to be instructed in the Golden Phoenix Tai Chi Program. I agree to undertake that I will not use or teach Martial Arts in an abusive manner outside the School's teaching premises. I accept my rights, responsibilities and risks as outline below

| Applicant's Signature:  | Date:   |
|---|---|
| Applicant's Rights and Responsibilitie  | s   |
| believe will be harmful to them. All student<br>skill and current physical condition, and to  | ity to excuse themselves from any exercise they<br>ts must evaluate each situation in the context of their<br>conduct each exercise and form in a manner that is<br>nat is unsafe for the student, it is the student's<br>the skill may be unsafe.  |
| harm and determine whether it is safe to co   | e right and responsibility to evaluate the extent of ontinue.   |
| INDEMNITY RELEASE AND WAIVER  |   |
| serious, and that those risks could include in my interests to follow all instructions give pre-existing medical or physical condition to and in the event of any change of my physical any changes that would affect my ability to risks involved with martial arts and health | l arts may involve a real risk of injury, potentially personal injury and economic loss. I understand it is ven to me by the instructor. I confirm that I have no hat would affect my ability to perform martial arts cal or medical condition, I will advise the instructor of engage in martial arts training. I understand the a training and acknowledge that those activities are oenix is not responsible for any injury or resultant |
| landlords, management companies and any loss, claim or proceeding in negligence, at c   | ii Chi, its instructors, staff, guests, students, other relevant parties (agents) against any liability, ommon law, tort or in respect of any personal injuries as a student at the school during the term of this e of Golden Phoenix and or its agents.   |
| Applicant's Signature:  | Date:   |
| (Parent/Guardian signature is required Parent/Guardian Full Name:   | •   |
| Donant/Cuardian Signatura   |   |