

# Aikido of Minnesota

and

Aikido - University of Minnesota



UNIVERSITY OF MINNESOTA  
AIKIDO CLUB



## 2010 Spring Seminar



**Featuring:** Rev. Zenko N. Okimura  
7<sup>th</sup> dan Shihan  
Chief Instructor, World Aikido Aikikai Inc.

### Seminar Schedule

#### Saturday, June 5 at UoM Armory

9:00 – 9:20	Registration
9:30 – 10:30	Class
10:45 – 12:00	Class
12:00 – 2:15	Lunch Break
2:15 – 3:15	Class
3:30	Testing
7:00	Dinner: location TBD

\* Please bring your own jo and bokken.  
See attached map for directions

#### Sunday, June 6 at UoM Armory

9:00 – 10:15	Class
10:30 – 12:00	Class

#### Seminar Fees:

Saturday and Sunday:	\$60
Saturday Only:	\$50
Sunday Only:	\$30

For additional information please visit our website, [www.aikidominnesota.org](http://www.aikidominnesota.org), or call Marla Spivak at 651-647-9350.



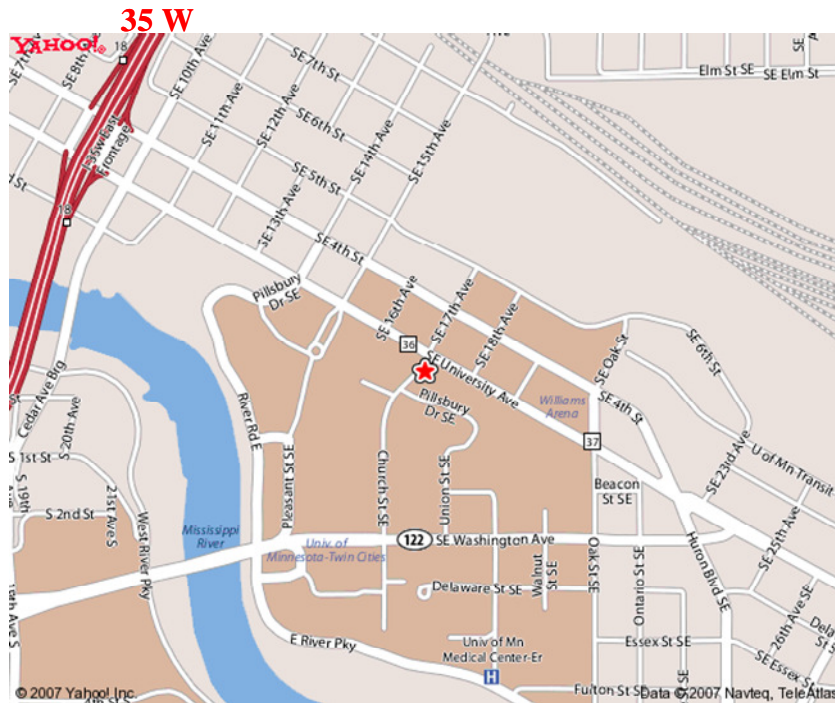
# Directions

## University of Minnesota Armory

15 Church St. SE

Minneapolis, MN 55455

Take Interstate 35W north from Interstate 94. Head east on University Ave. The nearest available parking ramps are the Church St. Garage, the 4<sup>th</sup> St. Ramp, and the Washington Ave. Ramp. For more details go to <http://www1.umn.edu/twincities/maps/Armory/>



# Registration

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

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Dojo: \_\_\_\_\_

Rank: \_\_\_\_\_

Days attending: Sat. Sun. Both (circle one)

## Seminar Fees:

Sat/Sun \_\_\_\_\_ (\$60)

Sat Only \_\_\_\_\_ (\$50)

Sun Only \_\_\_\_\_ (\$30)

Donation \_\_\_\_\_

Aikido of Minnesota is a 501 (c) (3) nonprofit organization.

Total \_\_\_\_\_

\* Registration forms and seminar fees will be collected at the door.

Please make checks payable to: **Aikido of Minnesota**

Please send an email to [info@aikidominnesota.org](mailto:info@aikidominnesota.org) if you plan to attend, so that we may plan accordingly and notify you of any changes!

For lodging information – hotel or housing with a member, please contact Marla Spivak ([spiva001@umn.edu](mailto:spiva001@umn.edu)) at 651-647-9350.

# Aikido of Minnesota and University of Minnesota

## General Release

**BECAUSE PARTICIPATION IN AIKIDO CLASSES MAY BE DANGEROUS, WE REQUIRE ALL PARTICIPANTS TO ASSUME ALL RISK BY SIGNING THIS GENERAL RELEASE.**

The Undersigned, for himself or herself and personal representatives, assigns, heirs and next of kin or any of them:

1. Hereby Releases, Waives, Discharges and Covenants Not To Sue Aikido of Minnesota or University of Minnesota, and each of its instructors or officers, employees and agents all for purpose herein referred to as Releases, from liability to the Undersigned, his personal representatives, assigns, heirs and next of kin for all loss or damage and any claim or demands therefore, on account of injury to the person or property or resulting in death of the Undersigned, whether caused by the negligence of Releases or otherwise while the Undersigned is upon the premises of Aikido of Minnesota or University of Minnesota and/or a participant in classes or workouts, and

2. Hereby Agrees To Indemnify And Save And Hold Harmless the Releases and each of them from any loss, liability, damage, or cost they may incur (1) due to the presence of any action of the Undersigned in or about Aikido of Minnesota or University of Minnesota, and/or (2) due to participation in classes or workouts whether caused by the negligence of the Releases or otherwise.

The Undersigned expressly agrees that the foregoing Release, Waiver and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the Law of the State of Minnesota and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The Undersigned warrants the following statements are true and correct and understands that the Releases have relied on them in entering into the foregoing Release, Waiver and Indemnity Agreement and in giving the Undersigned permission to enter the premises of the Aikido of Minnesota or University of Minnesota and to participate in aikido classes:

1. No oral representations, statements or inducements apart from this written agreement have been made.

2. The Undersigned individually is fully aware of the risks and hazards inherent in entering upon the premises of Aikido of Minnesota or University of Minnesota or in participating in any events or classes held in or upon the premises of Aikido of Minnesota or University of Minnesota and hereby acts voluntarily to enter upon said premises, knowing the present condition and knowing that said condition may become more hazardous and dangerous during the time that the Undersigned or either of them are upon said premises. The Undersigned is fully aware that martial arts and all activities associated with participation in aikido classes and workouts (which of necessity may include rigorous physical exertion, bodily contact, throws, pins, and takedowns) is a calculated risk activity, and contains inherent risks and dangers (including serious injury or death), that no amount of care, caution, instruction, or expertise can eliminate. The participant knows and understands the scope, nature and extent of the risks involved in the activities contemplated by this agreement. The Undersigned individually hereby voluntarily assumes all risks of loss, damage, or injury that may be sustained while in or upon the premises of Aikido of Minnesota or University of Minnesota or as a participant in aikido classes and workouts.

3. That the Undersigned participant gives consent to whatever medical care might be provided or available on the premises and further agrees to conform and comply with all the rules and regulations of Aikido of Minnesota or University of Minnesota.

4. THE UNDERSIGNED PARTICIPANT OR HIS OR HER LEGAL REPRESENTATIVE OR GUARDIAN HAS READ AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF ALL LIABILITY AND INDEMNITY AGREEMENT.

**PARTICIPATION IN AIKIDO CLASSES AND WORKOUTS MAY BE DANGEROUS.**

**BY SIGNING THIS DOCUMENT YOU CERTIFY THAT YOU ARE OVER 18 YEARS OF AGE AND THAT YOU UNDERSTAND ITS CONTENTS.**

SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE PRINT NAME: \_\_\_\_\_

OR, IF YOU ARE UNDER 18 YEARS OF AGE YOU WILL NEED THE SIGNATURE OF YOUR PARENT OR LEGAL GUARDIAN.

PARENT'S OR LEGAL GUARDIAN'S SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_