

Aiki Summer Retreat 2018

June 17 - 23, 2018

Please read and complete the registration & release forms fully (all 3 parts). (Incomplete forms will be returned for completion.) Pay careful attention to your form. Do not overlook the age request, witness and signature sections. Each participant must complete a separate registration form and waiver.
For additional registration forms send an email to sensei@joaikido.com.

PART 1: PERSONAL INFORMATION

Registration: _____

M

First Name (printed) _____ Last Name (printed) _____ F

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell phone _____

E-Mail _____ Rank _____

Dojo _____

I am Vegetarian
 I am Gluten Free

Roommate(s) _____

I have checked with my roommates prior to submitting this form - the request is mutual.

I understand that the dorms may have the top bunks filled.

Check our website for details!
JoinAikido.com

Check one: **\$1,590** Full Townhouse Plan (or \$966 deposit plus \$644 due May 15). You receive a \$100 discount by purchasing before February 24. The Full Townhouse Plan includes a double occupancy room, food, and training.

\$1,199 Full Dorm Plan (or \$731 deposit plus \$488 due May 15). You receive a \$100 discount by purchasing before February 24. The Dorm Plan includes dorm room, food, and training. The dorms are simple rooms with multiple occupancy.

\$859 Independent Plan (or \$527 deposit plus \$352 due May 15). This Plan includes training, food, and Granlibakken amenities. It does *not* include lodging.

We will send you a confirmation of your registration and deposit, along with more information about camp, within two weeks.

If you mail your registration/release forms and deposit, we must receive them at the same time or we will not process them. If you pay online, then you must do so before we receive your release forms in the mail. We accept registration on a first-come, first-served basis, in the order they are post marked or electronically received. If the Retreat is full, you will be notified and placed on the waiting list.

If you send your registration by overnight mail be sure to mark "no signature required," or it will probably be delayed.

Make checks payable to: **Aikido'Ka**
 Please complete this form, scan and email it to sensei@JoinAikido.com. Or you can mail it to:
Aikido'Ka, 142 East McKnight Way, Grass Valley, CA 95949

Cancellations: No cancellation fee if you cancel by May 15. If you cancel after May 15 and prior to June 1, the cancellation fee for \$100. If you cancel June 1 or later, you will be subject to a loss of the full registration fee.

PART 2: AIKI RETREAT BLOOD-BORN PATHOGEN POLICY

To protect participants against the risk of disease, the Retreat Staff has adopted the following policy intended to minimize the risk of transmission of HIV, Hepatitis-B, and other blood-borne pathogens during training activities. Current available medical evidence suggests that the risk of transmission of HIV during the type of body contact that occurs in Aikido training is extremely slight. Organizations such as the NCAA, the National Academy of Pediatrics Committee on Sports Medicine and the U.S. Olympic Committee have concluded that persons infected with blood-borne pathogens, particularly HIV, should not be barred from participating in contact sports. Certain federal and state anti-discrimination laws may also prohibit such a ban. These organizations have concluded that the already slight risk of transmission of HIV, and of other blood-borne diseases, can be reduced further by adoption of the Center for Disease Control recommended "universal precautions" with regard to exposed body fluids.

In the dojo, we will observe these "universal precautions." Generally, this means that instructors and all persons training in this dojo shall treat all exposed bodily fluids as if they are infected. Specifically, the following measures will be observed at all times:

1. Preparation for Training

The most frequent points of contact between training partners are the hands. Other exposed parts of the body subject to particular risk of cuts and abrasions are the feet and the area about the face and neck. For these reasons the following procedures must be observed.

- A. You will inspect the exposed parts of your body prior to participating in Aikido training to ensure that there are no breaks in your skin such as abrasions, open cuts, or sores.
- B. You will inspect your hands and feet to ensure that fingernails and toenails are trimmed and smooth in order not to be cause of cuts.
- C. You will wear a freshly laundered dogi to the first class which you attend each day.
- D. You will never enter the training mat wearing a dogi which is blood or bodily fluid stained to any degree whatsoever.

If you have any open cuts or sores, you will clean them with a suitable antiseptic and cover them securely with a leakproof dressing before coming on the training mat. You will make sure that they stay covered while you are training. If your hands or feet have broken skin, suitable taping, gloves or tabi will be worn to cover these areas. If you notice that someone else has an open cut or sore you will immediately advise him or her of the fact and cease training with the individual until the appropriate

covering is in place. If a person does not immediately remedy the situation, you will immediately notify the class instructor.

2. Procedure for Wounds Incurred During Training

If a wound becomes uncovered, open, or is bleeding even to a minor extent during training, the person bleeding shall immediately stop training and leave the mat until the bleeding stops and the wound is securely covered as described below. Immediate measures shall be taken to stop the bleeding. If the injured person needs assistance with this procedure, each person so assisting shall wear a pair of latex gloves (which are available at the training area first aid table). All used gloves and bloody cloths or dressings will be placed in a leakproof plastic bag provided for that purpose, and disposed of carefully. Hands shall be washed with soap and hot water immediately after gloves are removed. Minor blood stains on dogi will be treated with a disinfectant solution available at the first aid table. If there are major blood stains or soiling, the dogi shall be removed immediately, placed in a leak-proof container, and handled carefully until it can be laundered or disposed of.

3. Procedures for Contact with Another's Blood

If you come into contact with the blood of another, make an immediate attempt to locate and alert the individual who is the source of the bleeding, leave the mat, and follow Procedure 2. above.

4. Procedures for Blood on the Mat

If blood becomes present on the mat during training, the partner of the person bleeding will ensure that other students training do not come into contact with the blood. The blood, regardless of amount, will be cleaned p immediately by wiping down the exposed surface with the disinfectant solution provided for that purpose. ach person assisting in this task shall wear latex gloves (available at the training area first aid table.) and shall dispose of the gloves and cloths used for cleanup in the manner described in Procedure 2. above. Upon completion of the cleanup, each assisting person shall wash his or her hands with soap and hot water immediately after gloves are removed.

5. Responsibility for Health and Safety on the Mat

There are diseases and illnesses other than those known to be transmitted through blood and bodily fluids. You are reminded that you are responsible for not only your own health and safety, but also the health and safety of your training partners. If you know or suspect that you have any illness which might affect or infect others, or which might impair your ability to train safely, you have the obligation to refrain from training until you are not a risk to others.

Name (printed) _____ Signature or Guardian if under 18 _____ Date _____

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RELEASE, CONSENT AND ASSUMPTION OF RISK

1. I agree that before using the mat or any equipment at The Retreat, I will inspect the facilities and equipment I use. If I believe anything is unsafe, I will immediately advise the instructor present and will not participate in training any further.
Initials
2. I agree that I know and understand and will follow all safety procedures in using equipment and training weapons at the Retreat. I agree that at no time will I bring steel swords or other non-training weapons to The Retreat training area ("training area") without Frank Bloksberg's written consent. If I have any question about proper safety procedures, I will specifically ask Frank Bloksberg or the instructor at the training area.
Initials
3. I will not to attempt any skill level in training or any other activity of which I am not fully capable. I realize that the study of Aikido requires proper conditioning and training.
Initials
4. I understand that:
Initials
- A. Risks and dangers exist associated with Aikido training, including but not limited to bodily injury, communicable diseases, partial or total disability, paralysis and death. In accordance with the law, the sponsors of The Retreat, do not exclude individuals with medical conditions that do not pose a medically recognized threat to the health or safety of other students in the normal course of training. I understand that some unavoidable circumstances occur where these conditions may require special caution on my part to minimize danger to myself and others, and I acknowledge that it is my responsibility to act accordingly.
- B. In particular, I understand that some students may be infected with diseases such as HIV/AIDS or Hepatitis-B which can be transmitted by exchanges of blood or other bodily fluids that I may train with them. I acknowledge that I have read and will follow explicitly the Aiki Retreat Blood-Borne Pathogen Policy, a copy of which is attached to this release, Consent and Assumption of Risk Statement;
- C. Social and economic losses and damages could result from those risks and dangers described above which could be severe:
- D. These risks and dangers may be caused by my negligence, the negligence of my training partner, or the negligence of others around me who are training or doing any other activity, or by the negligence of the Aiki Summer Retreat or other agents or instructors of the Aiki Summer Retreat;
- E. Other risks not known or foreseeable at this time could arise.
- 5. I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISKS OF DEATH, ILLNESS, OR INJURY SUSTAINED WHILE PARTICIPATING IN OR OBSERVING THE AIKI SUMMER RETREAT, WHETHER OR NOT CAUSED BY THE NEGLIGENCE, INCLUDING GROSS NEGLIGENCE, OF THE RELEASED PARTIES DESCRIBED IN 7. BELOW.**
Initials

6. I accept and assume all risk and responsibility for all losses and damages following any injury, illness, disability, paralysis or death, however caused or alleged to be caused including injuries caused in whole or in part by the negligence of Aiki Summer Retreat, its representatives, agents, employees, instructors, or other participants, or owners or lessees of the premises, Granlibakken Tahoe including their officers, directors, agents and employees.
Initials
7. I release Granlibakken Tahoe, Aiki Summer Retreat, Aikido'Ka, LLC, Aikido'Ka, Frank Bloksberg, Michael Friedl, Kimberley Richardson, Craig Fife, and other guest instructors of the Aiki Summer Retreat, agents, employees, volunteers and all individuals associated with the Aiki Summer Retreat ("the released parties"), from any and all liability, claims, demands or actions whatsoever arising out of any damage, loss or injury to me while upon the Aiki Summer Retreat premises or while participating in any aspect of the Aiki Summer Retreat, whether such loss, damage, or injury results from negligence or otherwise.
Initials
8. I agree that I WILL NOT SUE OR MAKE A CLAIM AGAINST the released parties as the result of my participation at the Aiki Summer Retreat or at any other location where training takes place.
Initials
9. I agree to DEFEND AND INDEMNIFY THE RELEASED PARTIES from all claims, judgments and costs, including attorneys' fees, incurred in connection with any action brought as a result of my participation in any activity at the Aiki Summer Retreat.
Initials
10. I understand that Aikido is an educational system. I agree to strictly abide by the training rules posted at the dojo and to follow explicitly all instructions given by instructors during the course of my training. I agree to watch out for others in the training area and while training on the mat and to follow all the rules posted and otherwise explained to me. Should I break any of these rules, I understand that it is Frank Bloksberg's decision whether I may continue training and/or remain at the Retreat. I will abide by his decision. If the decision is made that I cannot continue training, or remain at the Retreat, because of my conduct. I will not receive any refund.
Initials
11. I hereby grant to the Aiki Summer Retreat, Aikido'Ka, LLC, Aikido'Ka, Frank Bloksberg, or any of their affiliated organizations, the irrevocable and unrestricted right to use and publish photographs and video of me, or in which I may be included, for editorial trade, advertising and any other purpose and in any manner and medium and to alter the photographs and video without restriction. I hereby release the photographer, Aiki Summer Retreat, Aikido'Ka, LLC, Aikido'Ka, Frank Bloksberg, their respective owners, managers, officers, instructors, staff, employees, contractors or any of its affiliated organizations from all claims and liability relating to the photographs or videos.
Initials
12. If a Court finds any portion of this agreement invalid, illegal or unenforceable to any extent and for any reason, the remainder of this agreement shall not be affected and shall be enforceable to the full extent permitted by law.
Initials

I make this agreement on behalf of myself, my heirs, successors, estate, and dependents. By signing this form I am asserting that I am _____ years of age, and that I am an adult.

Name (printed)	Signature or Guardian if under 18	Date
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For Parents or Guardians of Minors Training participants must be fifteen years of age or older by May 15, 2018. Parent or guardian must sign.

1. We the parents or legal guardian(s) consent to allow this minor individual to participate in Aikido training at the Aiki Summer Retreat. We will instruct the minor that he or she must inspect the facilities or equipment to be used, and if he or she believes anything to be unsafe, he or she will immediately advise the class instructor and will refuse to participate further in training.
Initials
2. We have read, understood, and initialed each of the paragraphs of the Release, Consent and Assumption of Risk portion of this form and intend to bind ourselves, the minor, and all heirs, successors, executors, the estate, and dependents of the minor, to its terms.
Initials
- 3. We agree to defend and indemnify the Released Parties, including costs and attorneys' fees, from any claim or action brought as a result of the minor's presence at or participation in any Aiki Summer Retreat activity.**
Initials

Name (printed)	Signature or Guardian if under 18	Date
Relationship to Minor:		