

ENROLLMENT AND RELEASE OF LIABILITY
FOR KAI CHI DO INSTRUCTOR TRAINING

Kai Level

Agreements are mutual understandings between people, that define intentions and inform expectations. To create a safe environment, establish trust, and facilitate harmony of purpose in the Kai Chi Do Instructor Training, we request your consent to the following understandings and agreements, waiver and release:

I understand that I am not under any obligation of any kind to participate in this event.

In order to obtain certification as a Kai Level Instructor for Kai Chi Do, I understand that I must complete the Kai Level weekend training sessions, participate in the 12 training tele-workshops, and sign a Kai Chi Do Instructor License Agreement.

I understand that Kai Chi Do and breathwork meditation are fitness and personal growth services designed to enhance quality of life. They are not health care services nor psychotherapy. Kai Chi Do and the Kai Chi Do Instructor Training are personal growth experiences; They are not treatment.

I agree that I will not use alcohol or any illicit substance during the Kai Chi Do Instructor Training.

I agree not to share or copy Kai Chi Do Instructor training materials.

I understand that Kai Chi Do includes physical exercise, breathwork, and meditation. Some people find these exercises physically demanding or strenuous. The exercises may also bring feelings and emotions to the surface. I understand that each participant is responsible for modifying these exercises and processes to accommodate their own needs or physical limitations.

I agree to assume full responsibility for my own well-being throughout the Kai Chi Do Instructor Training.

Waiver of Liability:

By signing below, I hereby agree on behalf of myself, my heirs, my assigns, executors, and personal representatives, to hold harmless Charles Robinson and Kai Chi Do Inc., their officers, directors, agents, employees, chaperones, and representatives from any and all liability claims, losses or damages arising from or in connection with participation in this training. To the best of my knowledge, I am in good health and physically able to participate in this activity. I release Charles Robinson and Kai Chi Do Inc. from any responsibility or any liability for any consequences, claims, injuries, demands, actions or causes of action arising from my participation in Kai Chi Do activities or my use of Kai Chi Do techniques. I have read this waiver of liability, understand its meaning, and agree to its conditions. I freely enter into this agreement of waiver and release.

DATE

SIGNATURE

PLEASE PRINT NAME

STREET ADDRESS: _____

CITY, STATE ZIP: _____

PHONE: _____ EMAIL: _____