

Registration Form	(Please Print)
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Name:			
Email:			
Address:			
City:			
Telephone Numbers: (Home)			
(Work)(Cell)_			
Birthday:	(M/	D/Y)	
Limitations or Injuries:			
How did you hear about us:			

Waiver and Release

Regarding my participation in this Qigong class. Conducted by Qigong Calgary Instructors and organized by Qigong Calgary. I, the undersigned, agree to hold harmless, and indemnify Qigong Calgary from all liability for damage or injury to myself or any person or property. I accept full responsibility for any damage or injury which may result. I have read, understood, and agree with the proceeding statements in this waiver and release.

Signature:	

Date: _____