



會員 / 學生註冊表 2018 – 2019 Membership / Student Registration Form

中文名 Chinese Name: _____

英文名 Name (Last): _____ (First) _____

同太極拳學會記錄 Same as OTCA's Official Record

電郵 E-mail: _____ 電話 Phone #: _____

地址 Address: _____

會員費 Membership Fee: \$35

會員課程學費(一學期) Member Course Fee (per term): \$70 額外 Additional

上學期 (2018 年 九月十五日至 2019 年一月十九日)

1st Term (September 15, 2018 to January 19, 2019)

下學期 (2019 年 一月二十六日至六月一日)

2nd Term (January 26, 2019 to June 1, 2019)

<p>初級 中級</p> <p><u>Beginner</u> <u>Intermediate</u></p> <p>楊式傳統太極拳 85 式</p> <p>Yang Style 85 steps</p> <p>陳式小架太極拳 64 式 <input type="checkbox"/></p> <p>Chen Style Small Form 64 steps</p> <p>陳式太極拳實用拳法一路 <input type="checkbox"/></p> <p>Chen Style Practical Method YiLu</p>	<p>吳式太極拳 16 式</p> <p>Wu Style 16 steps</p> <hr/> <p><u>下午班在 / PM Classes at Town Brown Arena</u></p> <p>孫式太極拳</p> <p>Sun Style</p> <p>楊式傳統太極 24 式</p> <p>Yang Style 24 steps</p>
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每班人數有限。Availability of classes is subject to the class size requirement as determined by the OTCA.

上午班在 / AM Classes held at Adult High School. 下午班在 / PM Classes at Tom Brown Arena.

請參看太極拳學會日曆來了解正確課程日期。Consult OTCA calendar for actual class dates.

請攜帶太極拳會員卡到所有課程和活動。Please bring OTCA membership card to all classes and events.

<<<<在背頁簽名 Please sign the waiver form on reverse side of this page >>>>

學會專用 FOR OTCA OFFICE USE ONLY			
付款 Payment	數額 \$Amount	日期 Date	負責人 Received by
<input type="checkbox"/> 現款 <input type="checkbox"/> 支票 上學期	\$ _____	_____	_____
Cash / Cheque 1 st Term			
<input type="checkbox"/> 現款 <input type="checkbox"/> 支票 下學期	\$ _____	_____	_____
Cash / Cheque 2 nd Term			
細節 Remarks _____			
註冊號數 Registration Number: _____			



渥太華太極拳學會

OTTAWA TAICHI CHUAN ASSOCIATION

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PRACTICE AND CLASS WAIVER FORM

AUTHORIZATION AND WAIVER OF LIABILITY

I acknowledge that participation in practices and classes arranged by the Ottawa Taichi Chuan Association (OTCA) may involve some risk of injury, illness, or loss of personal property. I agree to release and forever discharge the OTCA and the Board of Executives of OTCA, its members individually, and its officers, instructors, and teaching assistants, from any and all claims, demands, rights, and causes of action of whatever kind or nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen bodily and personal injuries, including death, damages to property and the consequences thereof, resulting from my participation in the OTCA practices, classes and related activities.

I certify that, to the best of my knowledge, I am in good health and physically capable of undertaking the OTCA practices, classes or related activities that I have registered to participate.

Acknowledgement of Understanding

I have read this waiver of liability, assumption of risk and indemnity agreement. I understand its terms and understand **I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing this agreement freely and voluntarily, and intend by my signature to be a complete and unconditional release of liability to the greatest extent allowed by law. My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators and assigns.

會員姓名 PRINT NAME: _____

會員簽名 MEMBER SIGNATURE: _____

日期 DATE: _____