

AWA[®]
Aikido World Alliance

Aikido

Instruction by Andrew Sato, Sensei
December 5 - 7, 2008
Hosted by Eishinkan Dojo



About the Seminar

As the mild days of spring blend into the heat of summer, come join us in training as we enjoy these seasonal changes. Tachi waza, suwari waza and buki waza will all be covered during the week long training. Please bring your Jo & Bokken.

Seminar Schedule

| | | |
|--------------------|---|----------------------------------|
| Friday - Dec 5th | 6:30-8.30 PM | Aikido |
| Saturday - Dec 6th | 10:00am – 1:00pm 03:00pm – 6:00pm 07:00pm | Aikido Aikido Group dinner |
| Sunday - Dec 7th | 9:30pm – 12:30pm | Aikido |

About the Dojo

Eishinkan dojo opened August 2003 by Myriam Cedres sensei. Cedres sensei is a health professional who combines her medical and Aikido expertise into a holistic approach for her teaching. She is currently ranked sandan and continues to make true O'sensei's words that "Aikido is for the world".

Lodging in the Area

Wind Chime Inn
1750 McLeary Ave.
Condado, San Juan
Ph: 787.727.4153

Comfort Inn
Clemenceau ST. # 6
Condado, San Juan
Ph: 787.721.0170

El Canario Inn
1317 Ashford Ave.
Condado, San Juan
Ph: 787.722.3861

Directions

Take De diego express highway towards Bayamon. Get off at exit #5, go straight until you see the gymnasium. The entrance is to the left after passing Bayamon's courthouse building

Seminar Registration Form – Eishinkan Dojo, PR

I would like to register for the seminar. Please find enclosed my check or money order (made payable to “Aikido World Alliance”) in the amount of:

- \$70 Entire Seminar
 \$40 Friday only \$60 Saturday only \$40 Sunday only

| | | |
|--|------------|--------------------------------|
| Event Date(s) | Fee | Today's Date |
| Name | | |
| Mailing Address | | |
| City | State | Zip |
| Home Phone | Work Phone | E-mail |
| Martial Art: Aikido <input type="checkbox"/> | | Other <input type="checkbox"/> |
| Name of Dojo | | Rank |
| Emergency Contact | | Phone |

For more information, contact:

E-mail: aikidoalliance@aol.com
 Ph: 773-784-4450
 Fax: 773-784-4405

Payment Method

- Check enclosed: _____ Amount: _____
 Credit Card: Visa MasterCard
 Card #: _____ Exp. _____
 Cash

Please mail registration and payment to:
 Aikido World Alliance, 4512 N. Lincoln Ave, Chicago, IL 60625

Release of Liability (Please read before you sign)

For the permission of Aikido World Alliance, to use its facilities and of the execution by others of agreements similar, the undersigned agrees that while upon the premises of Aikido World Alliance or while using its facilities or equipment, whether at Aikido World Alliance or at any other location for the purpose of practice or of demonstration, said premises, facilities, and equipment shall be occupied and used at the sole risk and responsibility of the undersigned, and the undersigned hereby releases Aikido World Alliance from any and all claims for personal injury, damage, or loss of any kind or description resulting from being thereon or from such use or from the acts of any persons thereon. The undersigned further agrees to indemnify and hold harmless Aikido World Alliance and each of its instructors, teachers, officers, directors, and members from or against any and all claims made or instituted against it or them arising out of the acts of the undersigned while upon the premises of Aikido World Alliance or while using any of its facilities or equipment, whether at the Aikido World Alliance or any other location for the purpose of practice or demonstration, including injury or loss to the undersigned however caused and injury or loss caused by the undersigned to any other person. I certify by my signature that I have read and understand this agreement in its entirety and all of my questions regarding it have been fully answered. I understand that Aikido World Alliance document activities and events involving classes and instruction. I give Aikido World Alliance permission to use any documentation, such as video taping, photography, or film, in which my image is taken in whatever way Aikido World Alliance wish. I understand that Aikido World Alliance is the sole owner of this documentation.

Signed: _____

Signed: _____

(Parent or guardian if participant is under 18)

| | |
|---------|--------------------------------------|
| Date: | By Whom: |
| Amount: | Cash: Ck: Chg: |
| Note: | |