

**RELEASE AND WAIVER**

WHEREAS I wish to participate in the Japanese drumming (taiko) instructional sessions conducted by Hinode Taiko Inc. ("Hinode Taiko") on \_\_\_\_\_, at the Japanese Cultural Association of Manitoba, 180 McPhillips Street, Winnipeg, Manitoba;

IN CONSIDERATION of Hinode Taiko allowing me to attend and participate in the instructional sessions:

- 1) I ACKNOWLEDGE that there are risks associated with participating in the instructional sessions, including, but not limited to:
  - a) **Superficial injury risks** such as blisters, scrapes, cuts or bruises;
  - b) **Environmental injury risks** such as temporary or permanent hearing impairment from repeated or prolonged exposure to loud noises;
  - c) **Traumatic injury risks** such as fractures or broken limbs, or other external or internal injuries such as might be caused by colliding with other persons, being struck by large wooden drumsticks, or falling during the course of choreographed movements; and
  - d) **General health risks** associated with strenuous physical activity, such as muscle, joint, tendon or other soft tissue injuries, soreness, strains, sprains, tears or inflammation, dehydration, and in rare cases heart attack or stroke.
  
- 1) (a) I AGREE to participate in the workshop notwithstanding the above-stated risks;
- (b) I FURTHER AGREE to assume all related injury and health risks of participating in the workshop.
  
- 3) For myself and my heirs, executors, administrators and assigns, I RELEASE Hinode Taiko, the Japanese Cultural Association of Manitoba, and their respective directors, officers, agents, employees, instructors and volunteers from any causes of action or claims for injury, death or damage during my participation in the workshop or thereafter.
  
- 2) I FURTHER AGREE to indemnify Hinode Taiko, the Japanese Cultural Association of Manitoba., their respective employees and anyone acting on their behalf from any claims, including claims arising out of the negligence of any of those persons, which may be made in consequence of the workshop.
  
- 3) I STATE that I am of the age of majority and legally competent to sign this Release and Waiver, or that as the parent or guardian of an underage dependant my signature below signifies my consent to this Release and Waiver on his/her behalf.

IN WITNESS WHEREOF I have set my hand the date set out below.

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Signature *[of parent or guardian, if required]*

Date: \_\_\_\_\_

Please print name here: \_\_\_\_\_