



Waiver/Release Form

*I understand that there is the potential for injury associated with my participation in the **City of Lakes Tai Chi Group** activities and classes, and that I participate in any activities and classes at my own risk. I hereby for myself, my heirs, executors and administrators, WAIVE and release all rights and claims for damage I may have against the **City of Lakes Tai Chi Group**, its agents, representatives, successors, and assigns for any and all injuries which may be suffered by me in connection with any participation in the **City of Lakes Tai Chi Group** activities and classes.*

Print name and sign below.

(Note: if you are a minor {under 18}, you will need to fill out a different release form.)

Name: _____

Emergency Phone: _____