

Minnesota WAAI Spring Aikido Seminar



Aikido of Minnesota, Grand Marais Aikikai,
and Prairie Winds Aikido

invite you to join us on

May 17th & 18th

featuring



Special Guest Instructor

Dr. Zohreh Soofi Sensei, 5th Dan
WAAI Co-Founder and Chief Instructor

All classes held at

Aikido of Minnesota Dojo
755 Prior Ave N, St. Paul, MN 55104

Seminar Fees

Saturday & Sunday	\$100
Saturday Only	\$75
Sunday Only	\$50

All classes taught by WAAI chief instructors

Registration forms also available at <http://prairiewindsaikido.com>
Contact Eric Buchanan with questions at 320-589-1686 or
wooshedzen@gmail.com.

Saturday, May 17th, 2025

Registration	8:15am
Class	9:00am - 10:00am
Class (Adults & Kids)	10:00am - 11:00am
Class	11:00am - Noon
Lunch	
Class	1:30pm - 2:30pm
Testing	2:45pm - 4:15pm
Dinner	6:30pm

Short breaks will be held between classes

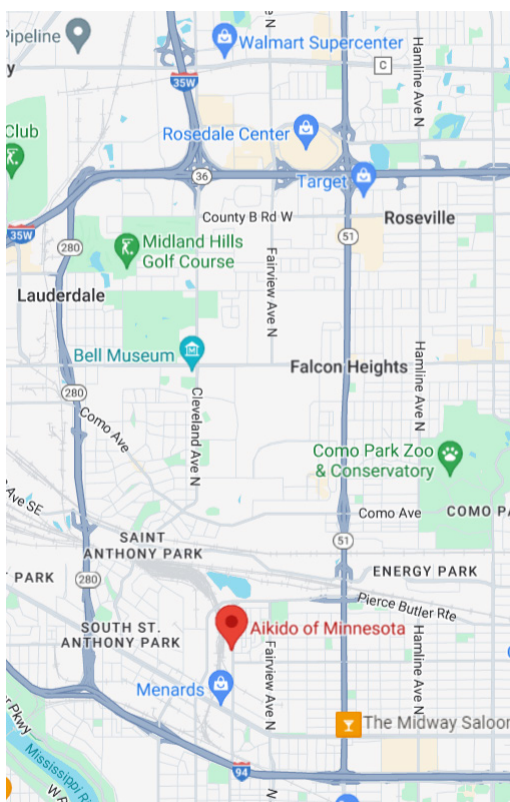
Sunday, May 18th, 2025

Class	9:30am - 11:15am
Presentations	11:30am
Lunch	Noon

Aikido of Minnesota - Dojo Location

755 Prior Ave N Suite 235b
St Paul, MN 55104

for directions via Google Maps:
<https://bit.ly/aom-directions>

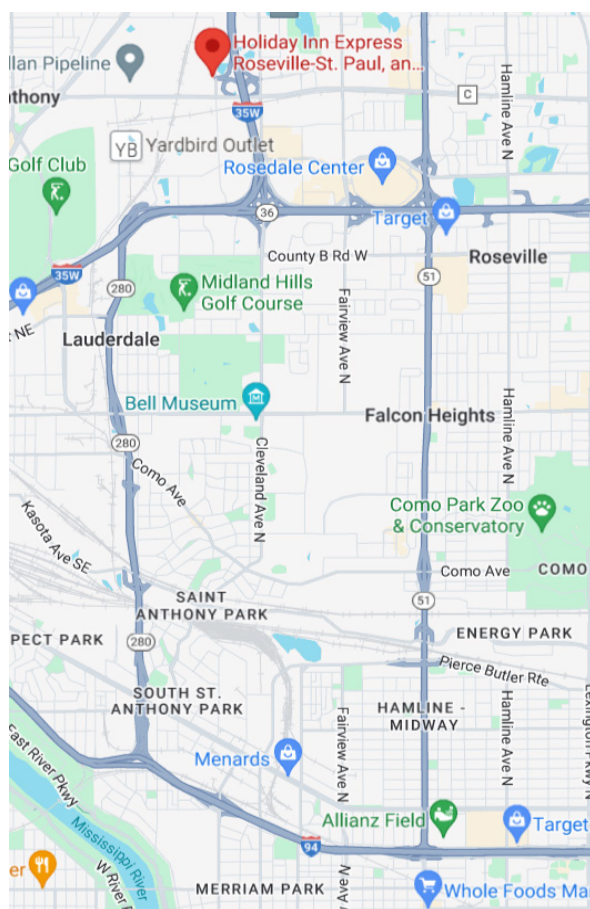


Please let us know if you will be joining
us by filling out and emailing the
registration form to
aikidominnesota@gmail.com

(or just come join us!)

Suggested Lodging

Holiday Inn Express
2715 Long Lake Rd
Roseville, MN 55113



Saturday lunch will be held at AoM

Saturday dinner will be held at
Sakura restaurant in St Paul:

350 St Peter St #195, St Paul, MN 55102

Registration Form

Name: _____

Address: _____

Phone: _____

Email: _____

Dojo: _____

Rank: _____

Days attending (circle one):

Both Days

Sat. Only

Sun. Only

<u>Seminar Days</u>	<u>Fees</u>	<u># People</u>	<u>Amount Paid</u>
Saturday and Sunday*:	\$100	_____	_____
Saturday Only*:	\$75	_____	_____
Sunday Only:	\$50	_____	_____
Square Reader Fee**:	\$3	<u> 1 max </u>	_____

Donation:

Total:



* Fee includes lunch

** If paying by credit/debit please consider including the square reader fee amount in total.

Please make checks payable to: **Prairie Winds Aikido**

For Aikido of Minnesota Use Only			
Check Number:		Receipt Number:	

Aikido of Minnesota General Release

**BECAUSE PARTICIPATION IN AIKIDO CLASSES MAY BE DANGEROUS, WE REQUIRE
ALL PARTICIPANTS TO ASSUME ALL RISK BY SIGNING THIS GENERAL RELEASE**

The undersigned, for himself or herself and personal representatives, assigns, heirs and next of kin or any of them:

1. Hereby releases, Waives, Discharges and Covenants Not To Sue Aikido of Minnesota, and each of its instructors or officers, employees and agents all for purpose herein referred to as Releases, from liability to the Undersigned, his personal representatives, assigns, heirs and next of kin for all loss or damage and any claim or demands therefore, on account of injury to the person or property or resulting in death of the Undersigned, whether caused by the negligence of Releases or otherwise while the Undersigned is on the premises of Aikido of Minnesota and/or a participant in classes or workouts, and
2. Hereby Agrees To Indemnify And Save And Hold Harmless the Releases and each of them from any loss, liability, damage, or cost they may incur (1) due to the presence of any action of the Undersigned in or about Aikido of Minnesota, and/or (2) due to participation in classes or workouts whether caused by the negligence of the Releases or otherwise.

The Undersigned expressly agrees that the foregoing Release, Waiver and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the Law of the State of Minnesota and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

The Undersigned warrants the following statements are true and correct and understands that the Releases have relied on them in entering into the forgoing Release, Waiver and Indemnity Agreement and in giving the Undersigned permission to enter the premises of Aikido of Minnesota and to participate in Aikido classes:

1. No oral representations, statements or inducements apart from this written agreement have been made.
2. The Undersigned individually is fully aware of the risks and hazards inherent in entering upon the premises of Aikido of Minnesota or in participating in any events or classes held in or upon the premises of Aikido of Minnesota and hereby acts voluntarily to enter upon said premises, knowing the present condition and knowing that said condition may become more hazardous and dangerous during the time that the Undersigned or either of them are upon said premises. The Undersigned is fully aware that martial arts and all activities associated with participation in aikido classes and workouts (which of necessity may include rigorous physical exertion, bodily contact, throws, pins, and takedowns) is a calculated risk activity, and contains inherent risks and dangers (including serious injury or death), that no amount of care, caution, instruction or expertise can eliminate. The participant knows and understands the scope, nature and extent of the risks involved in the activities contemplated by this agreement. The Undersigned individually hereby voluntarily assumes all risks of loss, damage, or injury that may be sustained while in or upon the premises of Aikido of Minnesota or as a participant in aikido classes and workouts.
3. That the Undersigned participant gives consent to whatever medical care might be provided or available on the premises and further agrees to conform and comply with all the rules, regulations and policies of Aikido of Minnesota.
4. THE UNDERSIGNED PARTICIPANT OR HIS OR HER LEGAL REPRESENTATIVE OR GUARDIAN HAS READ AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF ALL LIABILITY AND INDEMNITY AGREEMENT.

PARTICIPATION IN AIKIDO CLASSES AND WORKOUTS MAY BE DANGEROUS.

Aikido of Minnesota (AOM) does not discriminate on the grounds of race, religion, gender or sexuality. All AOM members are expected to conduct themselves with respect, integrity, and responsibility. AOM reserves the right to refuse service, at its discretion, to anyone whose conduct is detrimental to themselves, fellow AOM members, or their community.

BY SIGNING THIS DOCUMENT YOU CERTIFY THAT YOU ARE OVER 18 YEARS OF AGE AND THAT YOU UNDERSTAND ITS CONTENTS.

SIGNATURE _____ DATE: _____

PLEASE PRINT NAME: _____

OR, IF YOU ARE UNDER 18 YEARS OF AGE YOU WILL NEED THE SIGNATURE OF YOUR PARENT OR LEGAL GUARDIAN.

PARENTS OR LEGAL GUARDIAN'S SIGNATURE _____ DATE: _____