



Anderson Park District

Tai Chi for Health, age 18 years and up

Tai Chi is an enjoyable mind/body exercise with roots in Chinese medicine and martial arts. Learn these slow gentle movements that have been shown to improve health, balance, posture and mental focus for people of all fitness levels. No experience necessary. Tai Chi classes are taught by Kristin Dietsche, certified Tai Chi for Health instructor. Please wear loose, comfortable clothing and flat, closed shoes. Anderson Parks will follow health and safety practices recommended by the Centers for Disease Control, the Ohio Department of Health and Hamilton County Public Health at our activities. The instructor requires masks to be worn for this class.

Register in advance; space is limited.

Session 1: Fridays, January 14-February 18

Time: 9-10 a.m.

Session 2: Fridays, March 4-April 8

Time: 9-10 a.m.

Price per session: \$60 per resident, \$90 per non-resident

Place: Anderson Parks RecPlex, 6915 Beechmont Ave.

Questions: (513) 388-5082

Tai Chi for Health Registration ~ Winter 2022

Participant's Name _____ Birthdate ____/____/____ Gender _____

Address _____ City _____ State _____ Zip _____

Phone (h) _____ (c) _____ E-mail _____

Medical Concerns: allergies, conditions, medications: _____

Emergency Contact Name / Relationship: _____ Phone: _____

Please select session(s): ____ Session 1 ____ Session 2 **Total Due: \$** _____

Office Use Only: Date/Time _____ Total Paid \$ _____ Cash ____ CC ____ Check # _____ Ck Name _____ Staff _____

Make checks payable and return to: Anderson Park District, Anderson Parks RecPlex • 6915 Beechmont Ave • Cincinnati, OH 45230
Registrations accepted on a first come, first served basis and are subject to the completion of payment and *Release of Liability & Authorization*. The APD may cancel or alter programs pending registration numbers.

RELEASE OF LIABILITY & AUTHORIZATION: I, the undersigned, hereby authorize my, and/or my child's, participation in the Anderson Township Park District dba Anderson Park District ("APD") activity for which I am registering. I knowingly and freely accept all risks associated with participation in this activity, and hereby agree to release, hold harmless, and indemnify: the APD; Forest Hills Local School District; Anderson Township; and Anderson Foundation for Parks & Recreation; and their respective Boards, employees, agents, assigns, independent service providers, sponsors, and volunteers from all responsibility in the event of accident, injury, or illness associated with participation in this activity. I hereby acknowledge the APD has provided me with, as required by law, the Ohio Department of Health "Concussion Information Sheet" and "Lindsay's Law-Sudden Cardiac Arrest information", via www.andersonparks.com and at the Anderson Parks RecPlex, 6915 Beechmont Ave, Cincinnati, OH 45230.

By signing this registration, I agree to abide by the APD's health and safety participation requirements. I agree to the APD's Program Registration Information and Refund Policy. In consideration of my and/or my child's participation in this APD activity/program, I agree that my likeness, or the likeness of my child, may be photographed or videotaped and that such image(s) may be published in an outlet used to promote or publicize the APD. Furthermore, I authorize the APD to use my e-mail address to send me APD information. My signature below indicates that I am at least 18 years of age, and that I have read and understand the above information concerning participation in the APD activity for which I am registering myself and/or my child.

Participant (Parent/Guardian) Name _____ Signature _____ Date _____

Visa _____ MasterCard _____ Discover _____ Amex _____ Card # _____

Security Code (BACK of Card) _____ Exp. Date _____ Name on Card _____