

REGISTRATION FORM



SEMINAR WITH ALEX KOSTIC 11 th, and 12 th FEBRUARY 2017

Name and surname: _____

Identity document: _____ Nationality: _____

Date of birth: _____ Age: _____

Address: _____

Phone: _____ Mail: _____

In an emergency warn: _____

Phone: _____ Kinship: _____

Disclaimers, rules and regulations

My participation in this seminar is voluntary and under my own responsibility.
The organizers and instructors aren't responsible for the physical or psychological damage that I may suffer or cause to others, or the subsequent sequels.

I accept the promotional use of the images and video recordings made during a seminar in which I appear, as well as his publication in the press, internet or any other means.

I certify that I have no health problem that can represent contraindication for practice non competitive sports and my aptitude for physical activity has been previously verified by qualified medical personnel.

I will be respectful of the Master, the organization, and the other participants.
I will have special care for my actions, my clothes and my hygiene, as well as care for the facilities, I will avoid making statements or racist, political, religious or sexist comments.

I understand that the organization can expel me the Seminary in case of breaking the rules.

With my signature I declare that I have read the rules and accept them.

Barcelona, 11th February 2017

Signature: _____