



He Lei Hiwa No 'Iolani Luahine Workshop Registration Form

Mail to:
Halau Hula O Kou Lima Nani E
61 Andrews, Hilo 96720

Name _____

Address _____

E-mail _____

Phone _____

- **\$15-- Morning Workshop**
9:30-10:00--Registration
10:00-12:00—Hula Kahiko
- **\$20-- Lunch**
- **\$15-- Afternoon Workshop**
1:30-2:00—Registration
2:00-3:30—Hula `Auana
- **\$25-- Poi Dinner + Entertainment + Kumu Talk Story**
6:00 - 9:00 p.m.
- **\$_____ Total Registration (\$75 for entire day)**
Payable to Hula Halau O Kou Lima Nani E, Inc

I agree to take responsibility for assessing my health and fitness to determine my participation in a physically demanding workshop. I agree to monitor my physical, mental and emotional health and safety during workshop, and adjust my participation to maintain my health and safety. I agree to hold harmless the Outrigger Keauhou Beach Resort, He Lei Hiwa No `Iolani Luahine Festival, Hula Halau O Kou Lima Nani E, Inc., the County of Hawai`i, as well as any and all sponsors, staff, and volunteers for any accidents, injuries or health issues occurring during or after the workshops.

Signed _____ Date _____

Emergency Contact Name _____ Phone _____