



## International Martial Arts Federation - Americas

# 国際武道院・国際武道連盟

Founded in 1952, the Kokusai Budoin, International Martial Arts Federation, is dedicated to providing access to archives of historical information and sources of traditional instruction, as well as the promotion of friendship and cooperation among leaders of the Japanese martial arts and culture. IMAF is a registered member of the UNITED NATIONS Department of Economic and Social affairs.

### REGISTRATION FORM:

Please fill in completely to reserve your space. Checks to "Arching Oaks" or PayPal to [imafamericas@yahoo.com](mailto:imafamericas@yahoo.com). Cost for the **events are:**

	<u>Participant</u>	
___ Full Participation	\$175	\$140 (early registration by October 25 <sup>th</sup> ) \$160 (non-member)
___ One day Training	\$60	\$80 (non-member)
___ Additional Banquet Guest	\$40	

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ Current Rank / Art: \_\_\_\_\_ Current Rank / Art: \_\_\_\_\_

Name of Dojo: \_\_\_\_\_ Dojo Website: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_

### Waiver of Responsibility

*I realize that participation in martial arts training and/or Arching Oaks activities entails the primary assumption of risk of injury to me. I agree to follow the rules of the Kashimon Dojo and Arching oaks and to complete the training once started, or forfeit the entire training/activity amount. I freely and voluntarily accept and assume all such inherent risks and possibility of personal injury while attending activities at the **Kashimon Dojo and/or Arching Oaks**. I agree not to hold responsible or absolve, The Kashimon Dojo, and/or Arching Oaks grounds, and/or Florida Kyudo Kai, and/or the American Kyudo Federation, and/or the Kokusai Budoin (IMAF), and/or the Toyama Ryu Batto Do Renmei, and/or any other participants and/or Instructors and/or agents and/or staff for any accidents and/or injuries incurred while participating in these events and/or while on property. This waiver is binding upon my next of kin, family, heirs, personal representatives, beneficiaries and assigns, and inure to the benefits of the Organization, its assigns and successors. THIS IS A WAIVER AND RELEASE OF LIABILITY. I HAVE READ THE ENTIRE CONTENTS OF THIS DOCUMENT. I UNDERSTAND THAT I HAVE CEDED SUBSTANTIAL RIGHTS BY AGREEING TO THE PROVISIONS IT CONTAINS.*

**Print** and **Sign** your name: \_\_\_\_\_

In case of a minor, the parent or Guardian must sign below:

Signed \_\_\_\_\_ Date \_\_\_\_\_, 2021.