



2019 SEIDO KARATE KID'S BREAKING SEMINAR SUNDAY, JANUARY 27TH @ 10AM

Last
Initial

LAST NAME _____ FIRST NAME _____

STREET ADDRESS _____ APT. | _____

CITY _____ STATE _____ ZIP _____

PHONE (H) _____ - _____ - _____ MEMBER NUMBER (HONZAN: 4 DIGITS) _____

DATE OF BIRTH _____ mo. _____ day _____ yr. AGE _____ BELT RANK _____ KYU / DAN (CIRCLE ONE) MALE FEMALE

BRANCH _____ INSTRUCTOR _____

SEMINAR	INSTRUCTOR	OPEN TO	TIME & LOCATION	PRICE
TAMESHIWARI: The Art of BREAKING*	Nidaime	All Kids: 5 th Kyu & Above (Yellow Belt & Above)	Sun, Jan 27th 10:00am- 11:00am	\$35

* Two (2) boards are included with the cost. Additional Boards are also available to reserve at set prices below.

***Please note there will be a limited amount of boards available for purchase.**

	QTY	TOTAL
Breaking Seminar		\$ <u>35.00</u>
Number of Board(s) _____		\$ _____
TOTAL=		\$ _____

Prices for boards:

Board(s)	Price
1	\$6
5	\$25
10	\$45

Payment may be made by cash, check, Visa, MasterCard or money order. All checks must be made payable to: **Seido Johshin, Inc.**

CARD TYPE: MasterCard Visa

CARD NUMBER: _____ EXP _____

The applicant warrants, represents and acknowledges that he/she is fully aware of the nature and risks involved in the World Seido Karate Seminar Series and he/she is physically and mentally fit to participate in such activity. The applicant further agrees that in consideration for being permitted to participate, he/she assumes the risk of any and all accidents and injuries of any kind sustained by him/her by reason of, or in connection with, said Seminar activities. The applicant hereby releases, discharges and absolves Seido Johshin, Inc. and THE WORLD SEIDO KARATE ORGANIZATION, its agents and employees of any and all liability and responsibility for any accidents or injuries, whether the same are caused by or attributed to their negligence or the negligence of any of them. The applicant further agrees to assume the risk of any accident or injury of any kind sustained anywhere in the building where said Seminar is held, or on entering or leaving such building and hereby releases, discharges and absolves Seido Johshin, Inc AND THE WORLD SEIDO KARATE ORGANIZATION, its agents and employees of any and all liability and responsibility for any accidents or injuries, whether the same are caused by or attributed to their negligence or the negligence of any of them. The applicant fully understands that any medical treatment given will be of first aid type only. The applicant consents to the use of, and waives any compensation whatsoever for, all pictures, movies, tapes, TV, media coverage, etc. by Seido Johshin, Inc., THE WORLD SEIDO KARATE ORGANIZATION or those designated by them.

X _____ **X** _____
STUDENT (signature) DATE PARENT/GUARDIAN (required for applicants under 18) DATE

SEIDO JOHSHIN, INC., 1 PARKWAY PLAZA, ELMSFORD, NY 10523 Tel: 914-909-5000

❖ OFFICE USE ONLY ❖

PAID BY: CASH CHECK MONEY ORDER VISA MC TOTAL \$ _____ DATE ____/____/____ INITIALS _____