



GOJU-RYU KARATE-DO KYOKAI

APPLICATION FOR MEMBERSHIP

Date _____ Rank _____ Dojo _____

Full Name _____ Birth Date _____ Sex _____

Address _____ City _____

State/Province _____ Country _____ Postal Code _____ Phone _____

1) Do you have any conditions which would restrict your ability to engage in vigorous physical activity? Yes No

2) Have you ever been diagnosed as having a disabling condition(s) which would restrict your ability to engage in vigorous physical activity? Yes No

3) Is there any reason why you are limited in your ability to engage in vigorous physical activity? Yes No

If "Yes" to any of the above questions, describe said condition(s), treating physician(s), and the dates of treatment, in detail, on reverse side of this form.

I am in good health and do not suffer or have suffered or been diagnosed with any physical or mental condition, problem, illness, or limitation which would limit, endanger or prevent participation in the practice of martial arts. I agree to report any changes in health, medical condition or limitation immediately and to provide a medical approval for my fitness to participate as a condition for taking part or continuing martial arts activity. **Initial:** _____

I am fully aware that the study and practice of martial arts is by its nature a vigorous physical activity involving physical contact between the participants. I am also aware that, as a natural result of the rigorous training and physical contact, painful and substantial injuries may occur. My request to participate in the practice of martial arts is of my own free choice and acceptance of the inherent risk involved in this sort of activity. **Initial:** _____

In making application for membership I do so with the full knowledge that the techniques of maximum self-defense which, in part, comprise martial arts should be learned for use in self improvement, competitive sport, or self-defense only. I swear unconditionally that I will never willfully harm anyone, except in defense of myself or another. If the need arises to so act, I will do so only so long as the attacker poses a real threat and will attempt to inflict no more injury than necessary to accomplish this end. **Initial:** _____

Waiver and Release

Jurisdiction is in the State of Ohio, United States of America

In consideration of my acceptance into membership, I agree to waive and release, hold harmless and indemnify the organization, including but not limited to, officers, participating members and instructors, all clubs, organizations, and firms of any and all liability for bodily injuries, disease, or ill health, or the aggravation of such, disability, death, negligence by myself or others, all claims, demands, cost, losses, and expenses, which I, my heirs and/or personal representatives may have arising out of, or caused in any way by, or having any connection with my participation in martial art activities, training, contests, and practice, and/or the use or condition of any and/or all facilities and materials owned, leased, or in the care or use, custody, or control of any of the above listed, including traveling to and from activities. I agree that I have read this waiver and release and understand that I give up substantial rights by signing it, and sign it voluntarily. **Initial:** _____

I acknowledge that I have read and understand each part of this application. I confirm that all of my statements or representations in this application are true and complete. I understand that according to the discretion of the instructor or director my membership can be denied or affirmed. If accepted I agree to abide by the organization rules, regulations and constitution and to contribute to the goals of the Goju-Ryu Karate-Do Kyokai. **Initial:** _____

Signature of Applicant _____ Date _____

Parent or Guardian _____ Date _____

(Signature of Parent or Guardian required if Applicant is under 18 years of age)

Instructor/Officer _____ Date _____

----- **For GKK Headquarters Use Only** -----

Date Recorded _____ Kyokai _____ GKK Card GKK Patch