



Japan Karate Association/ World Federation America

5701 Carmel Ave. NE, Suite B, Albuquerque, NM 87113 U.S.A. Phone (505) 256-0700 Fax (508) 823-4806

APPLICATION for INDIVIDUAL MEMBERSHIP of the Japan Karate Association World Federation America

Dojo Name : _____ Chief Instructor: _____
Student Name _____ Preferred Name _____ Gender ___ male ___ female Date of Birth _____
Home Address _____ City _____ State _____ Zip _____ Country _____
Home Phone _____ Work phone _____ Mobile Phone _____ Email _____
If student is under 18 parents' names (or legal guardians): Father _____ Work# _____ Mother _____ Work # _____
Why do you wish to study Karate with JKA/WF America? _____ I was introduced by: _____
Do you have health and accidental insurance? _____ Have you ever studied karate or any other martial art before? _____
Specify art, rank and length of study _____ Please submit a copy of your last rank.
Do you hold any qualifications or certificates (i.e. certified instructor, examiner, judge)? _____ Please submit a copy each individual qualification.
Have you ever been a member of any other karate or martial art organization? _____ Organization Name _____
Are you a member in good standing in that organization? ___ Have you ever left, been suspended or expelled from any martial arts organization? ___
Reason: _____ Who was/is your instructor? _____
May we contact your Instructor regarding your participation in that organization? _____ Instructor's contact information: _____
Have you ever been convicted of a misdemeanor offense involving violence? _____ Please attach a list of each offence and date of conviction.
Have you ever been convicted of a felony offense? _____ Please attach a list of each offence and date of conviction.

Release of Liability

The aforementioned individual wishes to participate in membership in the JKA/WF America. In consideration of the membership, training and service provided to said individual by the JKA/WF America and its' affiliates, clubs, and instructors, I/we hereby freely and knowingly accept and agree to the following terms and conditions to wit:

1) Assumptions of Risk: I/we understand the Karate is a hazardous activity that involves inherent risks of serious physical injury. With full knowledge of risks involved in Karate, I/we expressly assume all the risks of harm to myself arising from the practice of Karate with the JKA/WF America; 2) Release of Claims and Waiver of Liability: I/we hereby expressly and for all times on behalf of myself, my heirs, successors and assigns, executors and personal representatives release and agree to hold harmless JKA/WF America from any claim, demand or cause of action At law or equity of injury to me that arises or might have arisen from my participation in the practice of Karate, from my use of the equipment of the JKA/WF America, or from my participation in any activity associated directly or indirectly with JKA/WF America, or from my use of Karate techniques; and 3) Indemnification: I/we hereby agree to indemnify and hold harmless JKA/WF America from any claim, demand or cause of action At law or equity, including, but not limited to, any claim of personal injury, that may be asserted against the JKA/WF America by any individual or third party as a direct or indirect result of my participation in the practice of Karate, from my use of the equipment of the JKA/WF America, from my participation in any activity directly or indirectly associated with the JKA/WF America or from my use of Karate techniques.

Furthermore, by signing this applications and paying or authorizing payment of my annual membership dues, I/we certify that: 1) I/we have never been arrested for, convicted of or received deferred adjudication for any sex offense, felony of other crime(s) of moral turpitude; or if so, I/we must apply for membership (and receive approval through the JKA/WF America Main Office directly with a letter of explanation regarding complete details; 2) I/we have never been incarcerated in any local, state or federal jail or prison for any sex offense, felony or other crimes(s) of any nature whatsoever, or if so, I/we must apply for membership (and receive approval) through JKA/WF America Main Office directly with a letter of explanation regarding complete, details; and , 3) I have consulted with and been examined by a licensed physician and released to participate in the vigorous activities associated with karate training;

Do you have any medical conditions (including infectious diseases and blood borne pathogens) that could pose a hazard to yourself or fellow students? ___yes / ___no. If yes, please provide a physician's release. _____

STUDENT SIGNATURE _____ DATE _____

APPROVAL AND ACCEPTANCE BY PARENTS OR GUARDIAN:
The undersigned, the parents or legal guardian of _____ have read the foregoing, understand the same and do hereby accept and agree to the term, condition and provisions of the foregoing Release indemnity on behalf of ourselves and the said minor, intending to be legally bound hereby.

PARENT (GUARDIAN) SIGNATURE _____ DATE _____