



日本空手協会
世界連盟米国
JKA•WF AMERICA

APPLICATION FOR CLUB MEMBERSHIP

of the Japan Karate Association • World Federation America

Dojo Name _____ Chief Instructor _____

Dojo Address _____ City _____ State _____ Zip _____

Country _____ Region _____ Dojo Phone _____ Mobile _____

Website _____ Email _____

Number of years in business _____ Number of students _____ Number of black belt students _____

Type of business entity: (Corporation, LLC, Sole Proprietor, Non-Profit) _____

Does your Dojo have liability insurance? Yes No *Please provide certificate*

Information on Chief instructor:

Name _____ Chief instructor full time or part time? _____

Address _____ City _____ State _____ Zip _____ Country _____

Phone _____ Date of Birth _____ Number of Years Training _____ Years Teaching _____

Have you or your dojo ever been a member of any other karate or martial art organization? Yes No

Organization Name: _____

Are you a member in good standing in that organization? Yes No

Have you or your dojo ever left, been suspended or expelled from any martial arts organization? Yes No

(please explain) _____

Have you ever been a regional representative before? Yes No

JKA rank _____ *Please submit a copy of your last rank.*

Please list any rank in any other style/organization _____

Do you hold any qualifications or certificates (i.e. certified instructor, examiner, judge)? Yes No

Please submit a copy each individual qualification.

Have you ever been convicted of a misdemeanor offense involving violence? Yes No

If Yes, please attach a list of each offence and date of conviction.

Have you ever been convicted of a felony offense? Yes No

If Yes, please attach a list of each offence and date of conviction.

Information on other instructors: Please list each instructor and their rank

Name _____ Rank _____

Name _____ Rank _____

Name _____ Rank _____

Name _____ Rank _____

Name _____ Rank _____

Release of Liability

The aforementioned club wishes to participate in membership in the JKA/WF America. In consideration of the membership, training and service provided to said club by the JKA/WF America and its' affiliated clubs, and instructors. The club, its officers, instructors, contracting agents and employees (hereinafter referred to as "we") hereby freely and knowingly accepts and agrees 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 and the club's students arising from the practice of Karate with the JKA/WF America. _____ (initial)

2) **Release of Claims and Waiver of Liability:** The club hereby expressly and for all times on behalf of the club and myself, the club, my heirs, successors and assigns, executors and personal representatives release and agree to hold harmless JKA/WF America, its officers, instructors, contracting agents, and employees from any claim, demand or cause of action at law or equity of injury to me that arises or might have arisen from my or the club's participation in the practice of Karate, from my use of the equipment of the JKA/WF America, or from my or the club's participation in any activity associated directly or indirectly with JKA/WF America, or from the club's use of Karate techniques; and _____ (initial)

3) **Indemnification:** I and the club hereby agree to indemnify and hold harmless JKA/WF America, its officers, instructors, contracting agents, and employees 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, its officers, instructors, contracting agents, or employees by any individual or third party as a direct or indirect result of my or my club's participation in the practice of Karate, from my or the club's use of the equipment of the JKA/WF America, from my or the club's participation in any activity directly or indirectly associated with the JKA/WF America or from my or the clubs use of Karate techniques. _____ (initial)

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 or 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. _____ (initial)

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 _____ (initial)

3) I have consulted with and been examined by a licensed physician and released to participate in the vigorous activities associated with karate training; _____ (initial)

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

The person signing below warrants his/her authority to sign on behalf of the club and its members.

Dojo Chief Instructor Signature: _____ Date _____

Approval and acceptance by JKA/WF America _____ (country) _____ (dojo name)

Date accepted: _____ Authorized by: _____