



INTERNATIONAL SHOTOKAN KARATE FEDERATION
SOUTHWEST REGION SUMMER KARATE CAMP
JUDGING EXAMINATION JULY 14, 2019, 3:00 PM – 5:00 PM
ISKF Santa Monica, 1218 5th Street, Santa Monica, CA 90401
Exam Registration Deadline is June 22, 2019 (All fees non-refundable)

ISKF JUDGING EXAMINEE REGISTRATION FORM
July 14, 2019, 3:00 PM – 5:00 PM

Name: _____ Age (22+): _____

Dan Rank: _____ When Received: _____ Judge Rank: _____

Address: _____
STREET CITY STATE ZIP

Phone Number: _____ Email: _____

Instructor Name: _____ Dojo Name: _____

Instructor Signature: _____

Judging Examination (mark the rank you will be testing for)

Register By June 22nd

- | | | |
|---|--------------------------|------|
| D Examination (must be Nidan and above) | <input type="checkbox"/> | \$40 |
| C Examination (must be Sandan and above AND Rank D) | <input type="checkbox"/> | \$40 |
| ISKF Passport | <input type="checkbox"/> | \$75 |
| ISKF Membership | <input type="checkbox"/> | \$50 |

TOTAL AMOUNT DUE \$ _____

**** REGISTRATION DEADLINE IS JUNE 22, 2019. NO AT-DOOR REGISTRATION WILL BE ACCEPTED ****
ISKF PASSPORT & MEMBERSHIP REQUIRED TO TAKE EXAMINATION. The judging examination consists of a timed written examination and a practical examination. Please note that all examinees must wear a gi during both parts of the examination. Examinees must bring their own whistle, gloves, and mouthpieces to the practical examination.

Send forms & checks payable to: ISKF SANTA MONICA, 1218 5th Street, Santa Monica, CA 90401
Contact info@ISKFsantamonica.org or (310) 395-8545 for questions or credit card payment.

MISSION To preserve and spread traditional Japanese karate through exceptional instruction.



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ISKF JUDGING EXAMINEE REGISTRATION WAIVER

I, THE UNDERSIGNED, STATE:

I have been advised that my participation in the 2019 International Shotokan Karate Federation Southwest Region Summer Karate Camp Judging Examination (hereinafter “the Event”) may expose me to a risk of serious personal injury including permanent disability and death. I am aware of this potential danger, and with full knowledge of this risk, voluntarily accept and assume the risk of injury by signing this RELEASE and by participating in these activities. Further, and in exchange for my participation in the Event, I, on behalf of myself and my successors, assigns, and heirs, release Community Karate Foundation, Inc. d/b/a ISKF Santa Monica, the International Shotokan Karate Federation, the International Shotokan Karate Federation Southwest Region, and any of their sponsors, donors, owners, directors and officers, agents, employees, members, volunteers and representatives from any and all liability from injury, damage or loss to person, persons or property based upon their negligence in connection with my participation in the Event. I further agree to indemnify and to hold harmless Community Karate Foundation, Inc. d/b/a ISKF Santa Monica, the International Shotokan Karate Federation, the International Shotokan Karate Federation Southwest Region, and any of their sponsors, donors, owners, directors and officers, agents, employees, members, volunteers and representatives from any and all claims made against them arising from participation in the Event. I fully understand that any medical treatment given at the Event will be of a first aid treatment type only, and it is my responsibility to consult with my primary care provider(s) regarding my medical condition before or after the Event. **I consent that any pictures and videos taken of me in connection with the Event can be used for publicity, promotion, exhibition, or publication on all media worldwide shown now or in the future, and I waive compensation in regard thereto.** All participants in the Event is by permission only. The Director or authorized agents reserve the right to refuse entry to any person, school, team or club. I have read this CONSENT and RELEASE, understand the meaning of its contents, and sign it voluntarily.

Examinee Name (Print)

Date

Examinee Signature

EMERGENCY CONTACT:

Contact Name (Print)

Relation

Phone Number