

MASAMUNE DOJO

Membership Form

Personal Details

Name Date of Birth

Address Occupation

.....

..... B.K.A. No

Telephone No Current IAIDO grade

Mobile No E-mail

Additional details (for emergency only)

Relative's Name: Tel. No

Relationship (e.g. father, wife etc.)

Background

Previous Martial Arts Experience (including grades – please continue overleaf if required):

.....

.....

Do you have any injuries, medical conditions or medical history that may affect your practice of Iaido?:

.....

.....

Have you ever been charged with a crime that required a custodial sentence?:

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.....

Please remember that if you answer YES to either of above, it may not necessarily exclude you from practice, but for insurance purposes, we need to know of any circumstances that you think fit into these categories. Any answers given will be treated in the strictest confidence

Do you wish to be informed of any future events/seminars/practice changes via email?:

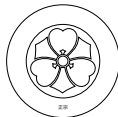
Declaration/Disclaimer

I agree that I have answered all questions fully and to the best of my ability. I have read the rules and regulations of the club and agree to adhere to them at all times.

SIGNED: DATE:

(parent or guardian signature required if member is under 18 years of age)

Any fraudulent answers may invalidate your insurance and we reserve the right to withdraw your membership from the club for reasons set out in the 'rules' section of the membership pack (also available separately on request)



MASAMUNE DOJO

Membership Application

I(Name)

of(Address)

.....

Telephone No. Occupation

Date of Birth. email

Health related problems/Disabilities

.....

.....

herein apply for membership to **MASAMUNE DOJO** and shall be referred to as the **APPLICANT** within this membership application from this point forward. Prior to making this application I have watched and fully understood the training within **MASAMUNE DOJO**. I have had the opportunity to ask freely any questions and I have satisfied myself as to the full extent of the training.

THIS IS AN IMPORTANT LEGAL DOCUMENT. It explains the risks you are assuming by applying for membership, it is essential that you fully read and understand this document prior to signing and dating. This document forms a legal and binding contract between the Applicant and MASAMUNE DOJO.

WAIVER AND CONVENANT NOT TO SUE

I the **APPLICANT** have volunteered to participate in the training as laid down and taught within **MASAMUNE DOJO**, this training will include using weapons such as an Iaito (practice sword), Shinken, wooden bokken and Jo. In consideration of **MASAMUNE DOJO**'s agreement to instruct, assist and train myself, I do here and forever release and discharge and hereby hold harmless **MASAMUNE DOJO** and their respective agents, heirs, assigns, contractors and employees from any claims, demands, damages, rights of action or causes of action, present or future, arising out of or connected with my participation in this or any exercise program including any injuries resulting therefrom.

ASSUMPTION OF RISK

I, the **APPLICANT**, recognize that the training might be difficult and strenuous and that there could be dangers inherent in the training for some individuals. I acknowledge that the possibility of certain physical changes during exercise does exist. These changes include abnormal blood pressure, fainting, disorders in heartbeat, heart attack, and in rare instances, death.

I, the **APPLICANT** understand that as a result of my participation in the training within **MASAMUNE DOJO**, I could suffer an injury or physical disorder that could result in my becoming partially or totally disabled and incapable of performing any gainful employment or having a normal social life.

I, the **APPLICANT** to the best of my knowledge and belief do not suffer from any medical or other health related condition which will prevent myself from taking part in the training within **MASAMUNE DOJO**.

I, the **APPLICANT** recognise that an examination by a physician, the cost of which shall be wholly my responsibility, should be obtained by myself the **APPLICANT** prior to any involvement in any training with **MASAMUNE DOJO**.

If I, the **APPLICANT** have chosen not to under go a physician's examination prior to beginning any training program with **MASAMUNE DOJO**, I hereby agree that I do so at my own risk. In any event, I acknowledge and agree that I assume the risks associated with any and all activities and/or exercises in which I participate within the training of **MASAMUNE DOJO**. I the **APPLICANT** agree to the following;

1. That I, the **APPLICANT** will fully update and inform the senior instructor present at all times, any health related problems, injuries, concerns or worries during the training. The onus being fully upon myself the **APPLICANT** to notify **MASAMUNE DOJO** of any such changes which might affect the **APPLICANT**'s and others training, health and well being.

2. That I, the **APPLICANT** regardless of whatever grade obtained within **MASAMUNE DOJO** will not and never use the name of **MASAMUNE DOJO** ,in any form or derivative for whatever purpose whatsoever without the expressed written consent of Ms. Fay Goodman, **MASAMUNE DOJO** (Birmingham).

3. That I, the **APPLICANT** acknowledge that I have no right whatsoever to use, publish, copy, reprint any written material received from **MASAMUNE DOJO** without the expressed written consent of Ms Fay Goodman, **MASAMUNE DOJO** (Birmingham) and that I have no ownership upon the name of **MASAMUNE DOJO** in any form or derivative.

4. That I, the **APPLICANT** will not involve any other member of **MASAMUNE DOJO** or other person in any conflict of any nature whatsoever. I the **APPLICANT** fully understand that I can use the techniques taught for the sole purpose of defending myself and others and accept that in the event of any conflict then I the **APPLICANT** will notify **MASAMUNE DOJO** who will preside over the matter to determine if I acted only in self defence, whose decision will be final and which I shall accept without question should it be deemed that I the **APPLICANT** acted with malice, that I shall be dismissed from **MASAMUNE DOJO** and all of its teachings.

This application being two pages long, having been read and fully understood by myself, the **APPLICANT**, I hereby sign to acknowledge all aspects, will adhere to the Masamune Dojo Club Rules and confirm I am in full agreement with the written contents of this document.

Signed.....Dated