

THIS PDF CONTAINS TWO SEPARATE APPLICATIONS:

FORM 1 **2017 IKO LA SEMINAR**

FORM 2 **2017 IKO LA CUP KATA CHAMPIONS**

The International Karate Organization Kyokushinkaikan
2017 IKO LA SEMINAR

APPLICATION FORM

Date: Sat & Sun, October 14 & 15, 2017

Seminar Location: POWER KARATE USA

1730 N. Sepulveda Blvd, Manhattan Beach, CA 90266

Sensei Hasegawa, Shihan Nakasak and Shihan Fard, will cover extensive KYOKUSHIN techniques from basic, kata & fighting method for 2 day seminar. Open to all current IKO members to come together and experience traditional KARATE.

- 1] This Seminar is open to current IKO Members, all ranks by Pre-Registration Only.
- 2] IKO Branch Chief/Dojo Operator's approval is required to participate.
- 3] Due to limited space, we cannot guarantee last minute participants at the Door. Please complete your application before the deadline.
- 4] IKO Membership Card or IKO Black Belt Card is required at the door for the seminar.
- 5] Please use a separate form for each applicant.
- 6] Once accepted as a participant, all fees are NOT-REFUNDABLE.

Name: _____ Rank(Dan/Kyu): _____
(First) (Last)

Age: _____ Tel/Fax: _____

E-mail: _____

IKO Membership#: _____ Black Belt ID#: _____

Branch Chief or Dojo Operator's Name: _____ Dojo Location: _____

Seminar Schedule:	SAT OCT 14th	10:00AM – 12:00PM	2:00 – 4:00PM
Beach Training	SUN OCT 15th	Manhattan Beach Pier	5:30 – 7:00AM
Seminar Schedule	SUN OCT 15th	10:00A – 12:00PM	2:00~4:00PM

Participation Fees:

US\$100.00 per Adult/Child– fees include: 2 day Seminar, T-Shirt & Sayonara party

Method of payment: (please check(✓) one)

Money Order or Certified Check enclosed

Submit this form with money order or certified bank check made out to "Power Karate USA" to address listed below.

Cash enclosed

Personally submit (do not mail) this form with cash by hand delivery at address listed below or to your IKO/Branch Chief/Dojo Operator.

RELEASE

I, _____ (Print Name), understand that any monies paid in advance by me for the purpose of receiving instruction, once paid are not refundable. I consent that any pictures furnished by me or taken of me in connection with the IKO Kyokushinkaikan or with the 2015IKO Training Seminar in Los Angeles can be used for publicity; promotion or television broadcast, and waive compensation in regard thereto. I understand that the above mentioned corporation reserves the right to terminate this agreement for reasons of unacceptable behavior to be determined by said corporation at its sole discretion. I solemnly swear that I am a law-abiding citizen and that at no time shall I ever use the techniques of karate or self-defense in a manner that will inflict personal injury or bodily harm to anyone, except in cases of emergency needs whereby my life and safety, or the lives and physical safety of others may depend upon my knowledge and application of these techniques. I will not be under the influence of drugs or alcohol at the time of any training session or other participation in karate. If under 18 this release and consent to be signed by parent or legal guardian.

X _____
PARTICIPANT'S SIGNATURE / Guardian's Signature, REQUIRED for persons under 18

DATE _____

Please Mail, Email or Fax this completed Registration Form by **OCT 7, 2017** to:

IKO KYOKUSHINKAIKAN LOS ANGELES
1730 NORTH SEPULVEDA BLVD., MANHATTAN BEACH, CA 90266 USA
Tel (310) 937-8855 / Fax (310) 937-9493
WWW.IKOLASEMINAR.COM
EMAIL: INFO@POWERKARATE.COM

International Karate Organization Kyokushinkaikan
2016 IKO LA CUP KATA CHAMPIONSHIPS

APPLICATION FORM

SUNDAY, OCT 15, 2017

Location: **POWER KARATE** | 1730 N. Sepulveda Blvd. Manhattan Beach, CA 90266

- 1] This event is open to IKO Members of all ages from 10 Kyu (Orange belt) and above (with current IKO Memberships), by Pre-Registration Only.
- 2] IKO Branch Chief/Dojo Operator's recommendation is required for your participations.
- 3] Due to limited space, we cannot guarantee last minute participants.
- 4] IKO Membership Card & Pre-Registration Required for Entry.
- 5] Please use a separate form for each applicant.
- 6] Once you submit this form (with payment), your space will be automatically confirmed.

Name: _____ Rank(Dan/Kyu) : _____
(First) (Last)

Age: _____ Tel/Fax: _____

E-mail: _____

IKO Membership#: _____ Black Belt ID#: _____

Branch Chief or Dojo Operator's Name: _____ Dojo Location: _____

Schedule: Sun: 3:00PM

Participation Fee: \$30 Adults / Kids

Method of payment: (please check(✓) one)

Money Order or Certified Check enclosed

Return this form with money order Or certified bank check made out to "POWER KARATE" to address listed below.

Charge to my Credit Card:

Card Type: MC Visa AMEX Other

Card Holder's Name: _____ **Card Holder's TEL #:** () - _____

ACCOUNT #: _____ **EXPIRATION DATE:** _____

RELEASE

I, _____ (Name), understand that any moneys paid in advance by me for the purpose of receiving instruction, once paid are not refundable. I consent that any pictures furnished by me or taken of me in connection with the IKO Kyokushinkaikan or with the IKO Kata Seminar in Los Angeles 2006 can be used for publicity, promotion or television broadcast, and waive compensation in regard thereto. I understand that the above mentioned corporation reserves the right to terminate this agreement for reasons of unacceptable behavior to be determined by said corporation at its sole discretion. I solemnly swear that I am a law-abiding citizen and that at no time shall I ever use the techniques of karate or self defense in a manner that will inflict personal injury or bodily harm to anyone, except in cases of emergency needs whereby my life and safety, or the lives and physical safety of others may depend upon my knowledge and application of these techniques. I will not be under the influence of drugs or alcohol at the time of any training session or other participation in karate. If under 18 this release and consent to be signed by parent or legal guardian.

X _____ DATE _____

PARTICIPANT'S SIGNATURE / Guardian's Signature, REQUIRED for persons under 18

Please Mail, Email or FAX this completed Registration Form by **OCT 7, 2017** to:

IKO Kyokushinkaikan Los Angeles

1730 No. Sepulveda Blvd. Manhattan Beach, CA 90266, USA

FAX: (310-937-9493) 310-937-8855 / Email: info@powerkarate.com