

**APPLICATION for MEMBERSHIP in the  
ROCHESTER SHOTOKAN KARATE DOJO**

**PLEASE PRINT**

**Membership # \_\_\_\_\_**

1. Name \_\_\_\_\_ Date of Birth \_\_\_\_\_
2. Address \_\_\_\_\_ City/Zip \_\_\_\_\_ Tel. \_\_\_\_\_
3. E-Mail Address \_\_\_\_\_ 4. Occupation/School/grade \_\_\_\_\_
5. Are you in good physical condition now? \_\_\_\_\_
6. Do you have any physical problems or handicaps? \_\_\_\_\_ Explain \_\_\_\_\_
7. Have you ever studied karate or any martial art? \_\_\_\_\_
8. If your answer to seven is yes, specify art and length of study. \_\_\_\_\_
9. Have you practiced any combative sports? \_\_\_\_\_ Please specify. \_\_\_\_\_
10. Why do you wish to study karate? \_\_\_\_\_
11. As a condition of this trial membership in the Rochester Shotokan Karate Dojo, do you agree to abide by the existing rules and regulations of the club as hereafter amended or adopted?  
\_\_\_\_\_
12. How did you learn about the program? \_\_\_\_\_
13. Sponsor (referring club member) \_\_\_\_\_

The foregoing answers are true to the best of my knowledge. (Parents must sign for children)

**RELEASE INDEMNITY**

I, intending to be legally bound hereby and as a condition of this trial membership in the Rochester Shotokan Karate Dojo (hereinafter referred to as the RSKD) do hereby release said RSKD, the members, instructors and representatives thereof, from any and all claims, liabilities, obligations, causes of action or demands that I or my administrators, executors, heirs or assigns may at any times hereafter have or obtain, due to or as a result of, any personal injury or bodily harm sustained or suffered by me during, arising out of or as a result of any KARATE activity, physical or athletic activity, or physical instruction or sport conducted or carried on by or for said RSKD, either by itself or with others, or in or occurring while I am on any premises or property occupied or used by said RSKD.

I further, intending to be legally bound hereby and as a condition of my trial membership do agree to indemnify and save harmless said RSKD, its members, instructors, and representatives from any act committed or omitted by me during or arising out of or as a result of any activity or exercise or sport carried on or participated in by said RSKD, by itself or with others, or occurring on any premises or property occupied or used by said RSKD.

I further release said RSKD, its members, instructors and representatives from all claims of liability for any property or valuables lost, mislaid, or stolen.

I sign this fully realizing that my participation or engagement in the activities of said RSKD may subject me to personal injury or bodily harm. I further have read the foregoing and fully understand the contents of this release indemnity.

Date \_\_\_\_\_ **Signature** \_\_\_\_\_

**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 terms, conditions and provisions of the foregoing Release Indemnity on behalf of ourselves and the said minor, intending to be legally bound hereby.*

**Print Name** \_\_\_\_\_ **Signature** \_\_\_\_\_