



Minakami Karate Dojo Promotion Application

Last Name		First Name	
Phone Number	()	Test Date	
Belt Size		Age	
		Height	ft in

To: Minakami Karate Dojo Hawaii LLC, Minakami Karate Dojo at UH - Registered Independent Organization, The University of Hawaii, Kapiolani Community College (The "Organizers")

Initial after each statement	I have enough attendance for my test	
	My dojo fees are up to date	
	My uniform will be clean and in good order	
	I will be clean without perfume or cologne	
	I will arrive early and wait quietly before the test	

Testing for (check appropriate box)	9th Kyu – Orange	\$30		4th Kyu – Green	\$55	
	8th Kyu – Yellow	\$35		3rd Kyu – Brown	\$60	
	7th Kyu – Blue	\$40		2nd Kyu – Brown	\$65	
cash				1st Kyu – Brown	\$70	
check #				5th Kyu – Green	\$50	1st Dan – Black
					\$450	

I hereby:

1. Release and forever discharge the Organizers and their staff, employees, agents, representatives, successors and assigns (collectively the "Releasees") of and from all liability, claims, demands, damages, costs, expenses, actions and causes of action caused, arising or to arise by reason of or during my participation in the Activity, whether prior to, during or subsequent thereto and notwithstanding that any Claim may have been contributed to or occasioned by the negligence of any of the Releasees.
2. Consent to any of the staff, employees, agents and representatives of the Organizers administering or consenting to the administration of such emergency medical care as such person deems appropriate in the circumstances.
3. Assume responsibility for health, medical and disability insurance coverage.
4. Agree that the organizers may use my photograph in future promotions

I hereby acknowledge reading, understanding and agreeing with the foregoing.

Print Name (parent/guardian if under 18)	Signature	Date
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