



ISKF Southwest Regional  
**2018 Summer**  
**KARATE CAMP**  
**July 6-8**



**Special Features**

- ☞ **“BUDO” cross-training class—Intro to Aikido**
- ☞ **“Self-Defense for Children”**
- ☞ **Sunday Beach Training and Picnic**

*Host & Chief Instructor, Karate:*  
**James Field** 8th Dan

*Guest Instructor, Aikido:*  
**Mitsunori Mano** 4th Dan

*Welcome*  
**Adults & Children 7+**

*Location*  
Venice Japanese Community Center  
12248 Braddock Dr, LA 90066

*Details*

See website [iskfsm.com](http://iskfsm.com) or call **310-395-8545**  
or visit **ISKF Santa Monica** 1218 5th Street, Santa Monica 90401



# International Shotokan Karate Federation Southwest Regional Summer Camp 2018 July 6<sup>th</sup> – 8<sup>th</sup>, 2018

## Host & Chief Instructor:

Sensei James Field, 8<sup>th</sup> Dan  
Regional Director, ISKF Southwest Region  
Chairman, ISKF Technical Committee

## Guest Instructor:

Sensei Mitsunori Mano, Aikido 4<sup>th</sup> Dan

Welcome to the ISKF Southwest Regional Summer Camp 2018! We have several new events for this year's camp, so we look forward to seeing you.

### Introduction to Aikido Training on July 7<sup>th</sup>, 2018:

For the first time, Sensei Mitsunori Mano, Aikido 4<sup>th</sup> Dan, will introduce basic concepts and application of aikido. This seminar will focus on redirecting an opponent's attack momentum, various types of throws, and joint locks.

### Self Defense for Children on July 7<sup>th</sup>, 2018:

Taught by Sempai Linda Mikell, Shotokan Karate 3<sup>rd</sup> Dan and ISKF Los Angeles Instructor, this class is designed to incorporate karate mindset and techniques that are geared for today's youth. Ages 7+ and no previous experience is required.

### Beach Karate Training on July 8<sup>th</sup>, 2018:

We will be hosting a Beach Karate Training, followed by a Beach Picnic. Campers should prepare to train in their karate *gi* and belt in the sand as well as the water at a moment's notice. Swimwear and sun protection are highly recommended. Picnic food and drinks will be provided. The beach training location will be announced at camp.

For any questions, please contact us:

## **International Shotokan Karate Federation Santa Monica Southwest Regional Headquarters**

1218 5<sup>th</sup> Street, Santa Monica, CA 90401

Phone: (310) 395-8545

Email: [iskfsm@verizon.net](mailto:iskfsm@verizon.net)



# International Shotokan Karate Federation Southwest Regional Summer Camp 2018 Tentative Schedule of Events

## Friday July 6<sup>th</sup>, 2018

Venice Japanese Community Center, Multipurpose Room  
12448 Braddock Drive, Los Angeles, CA 90066

6:00pm - 8:30pm	Registration Check-in
7:00pm - 8:30pm	All-Levels Karate Training

## Saturday July 7<sup>th</sup>, 2018

Venice Japanese Community Center, Multipurpose Room  
12448 Braddock Drive, Los Angeles, CA 90066

**\*\*Note: Street parking only due to previously-scheduled event\*\***

8:00am - 5:00pm	Registration Check-in
9:00am - 10:30am	Black Belt/Instructor Training (ISKF members only)
10:30am - 12:00pm	All-Levels Karate Training
1:00pm - 2:00pm	Self Defense for Children
2:00pm - 3:30pm	Introduction to Aikido Seminar
3:30pm - 5:00pm	All-Levels Karate Training
7:30pm - 10:00pm	Camp Meet & Greet Dinner, location TBA

## Sunday July 8<sup>th</sup>, 2018

Location TBA

9:00am - 10:30am	All-Levels Beach Karate Training
10:30am - 12:00pm	Beach Picnic



# INTERNATIONAL SHOTOKAN KARATE FEDERATION SOUTHWEST SUMMER CAMP 2018

## July 6-8, 2018

Venice Japanese Community Center, Multi-Purpose Room  
12448 Braddock Drive, Los Angeles, CA 90066

### Registration Form:

Name \_\_\_\_\_

DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex \_\_\_\_ Rank \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Region \_\_\_\_\_ Instructor \_\_\_\_\_

Email \_\_\_\_\_ Tel \_\_\_\_\_

Dojo Name \_\_\_\_\_

Are you a ISKF member? Yes \_\_\_\_ No \_\_\_\_

### Registration Fee: **\*\*Pre-Register by June 30 for discount\*\***

**Amount Due:**

Camp Fee (\$85 adult, \$55 youth) **\*\*add \$15 after June 30\*\*** \$ \_\_\_\_\_

Instructor Trainee/Black Belt Class (\$20, ISKF members only) \$ \_\_\_\_\_

T-shirt order (\$20, please indicate Adult S, M, L, XL) **\*\*Pre-Order Only!\*\*** \$ \_\_\_\_\_

Optional: Per class fee \$25 ADULT ISKF Members, \$20 Youth Members \$ \_\_\_\_\_  
\$30 Non-ISKF Adult Members, \$25 Youth

### I plan to attend the following classes:

7/6 7/7 7/7 7/7 7/7 7/7 7/8  
PM IT AM Youth Aikido PM AM

**Total Amount Enclosed:** \$ \_\_\_\_\_

### CREDIT CARD PAYMENT AUTHORIZATION:

Name on Credit Card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

CVV #: \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_ Billing Zip Code: \_\_\_\_\_

Please mail your check or money order payable to **"ISKF Santa Monica"** to:  
ISKF Santa Monica, 1218 5th Street, Santa Monica, CA 90401  
Must be post-dated no later than June 30th for discount!

# Participant's Medical Questionnaire:

To be completed by all adults and guardians of minors attending ISKF SOUTHWEST SUMMER CAMP 2018

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Rank \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Region \_\_\_\_\_ Country \_\_\_\_\_ Dojo \_\_\_\_\_

Do you have a history of any of the following conditions? Please check either yes or no for each one.

If you answer yes to any, please explain:

Yes No  
\_\_\_\_ \_\_\_\_ Heart murmur  
\_\_\_\_ \_\_\_\_ Hypertension  
\_\_\_\_ \_\_\_\_ Recent infection  
\_\_\_\_ \_\_\_\_ Bone fracture in the past six months  
\_\_\_\_ \_\_\_\_ Concussion or severe head injury in the past six months  
\_\_\_\_ \_\_\_\_ Seizures  
\_\_\_\_ \_\_\_\_ Eye injury  
\_\_\_\_ \_\_\_\_ Severe bone bruises requiring padding  
\_\_\_\_ \_\_\_\_ Kidney injury  
\_\_\_\_ \_\_\_\_ Allergy to medication (list all):  
\_\_\_\_ \_\_\_\_ Are you currently taking any medications? If yes please specify \_\_\_\_\_  
\_\_\_\_ \_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_  
Signature of Participant (Parent or Guardian if under 18 years of age)

## Participant's Waiver/Release Agreement:

EVENT: International Shotokan Karate Federation Southwest Summer Camp 2018. I understand that there are risks and dangers inherent in martial arts training and in participating in and/or receiving instruction at the EVENT. I understand and agree that by signing this Waiver/Release, I am assuming full responsibility for any and all risk of personal injury or death or for property damage suffered by me while participating in and/or receiving instruction at the EVENT. I expressly acknowledge that my participation in the EVENT may subject me to personal injury or bodily harm and I assume any and all risks of that participation. I also understand that in order to be allowed to participate in and/or receive instruction at the EVENT, I must give up my rights to hold the International Shotokan Karate Federation Southwest and its affiliates, Venice Japanese Community Center, and any and all other clubs, schools, instructors, members, judges, officials, representatives and all other participants (collectively the "Releasees") liable for any injury or damage which I may suffer while participating in and/or receiving instruction at the EVENT. I also understand and agree that by signing the Waiver/Release, I acknowledge that I am solely responsible for having or obtaining all insurance coverage which may be necessary or desirable in connection with my participation in and/or receipt of instruction at the EVENT and for any travel to and from the EVENT and in all lodging or any other activities which may be related directly, indirectly or incidentally to the foregoing. I further understand and agree that any fees or costs required for necessary or requested medical attention shall be my sole responsibility and that I shall not seek indemnification or contribution from any Releasee in connection therewith. I also understand that the Releasees shall not be responsible for any incidental, consequential or exemplary damages of any kind even if they are notified of the possibility of such in advance. I also understand and agree that any damage to any lodging sites or the tournament site that I cause is my full responsibility. In no case are said damages the responsibility of any of the Releasees. I further understand and agree that as consideration for my participation in the EVENT, the International Shotokan Karate Federation, Southwest and /or its designees shall have the right to use my name, image or likeness in the promotion of the EVENT or in any publication relating to the EVENT (or similar Events) and in any broadcast or rebroadcast transmission of the EVENT without any additional consideration to me for the use of my said name, image or likeness. I understand and agree that this Waiver/Release will have the effect of releasing, discharging, waiving and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation in and/or receipt of instruction at the EVENT. Knowing this, and in consideration of being permitted to participate in and/or receive instruction at the EVENT, I hereby release and agree to indemnify and hold harmless the above-named Releasees individually and their entities, and their officers, agents, principals, partners, shareholders, directors and employees from any and all liability or costs, including attorney fees, associated with or arising from my participation in and/or receipt of instruction at the EVENT. I further understand and agree that this Waiver/Release will be binding on me, my spouse, my heirs, my personal representative, my assigns, my children and any guardian ad litem for said children. I understand that if I am signing this Waiver/Release on behalf of my minor child, that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf.  
I acknowledge that I have read this Waiver/Release Agreement and that I understand the words and language in it.

Print Name \_\_\_\_\_ Date \_\_\_\_\_  
Sign Name \_\_\_\_\_ Witness \_\_\_\_\_

**WE STRONGLY ADVISE ALL PARTICIPANTS TO HAVE THEIR OWN MEDICAL INSURANCE.**