**Stepping Stones Children’s Program Enrollment Form**

*\*Indicates Required Fields*

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| --- |
| Personal Information – Participant  |
|  | \*Name (Please Print):  |  |
| Current Address: |  |
| City: |  | Province: |  |
| \*Date of Birth: | YYYY/MM/DD |

|  |
| --- |
| Contact Information – Parents or Guardians |
|  | Primary Phone Number: |  | Alternative Phone Number: |  |
| \*E-mail Address: |  |

*E-mail is essential for formal communications pertaining to practice, notice of cancellations, rescheduling or other major events and news.*

|  |
| --- |
| Emergency Contact |
|  | \*Name: |  | \*Relationship: |  |
| \*Primary Phone Number: |  | Alternative Phone Number |  |

|  |
| --- |
| Medical Information – Participants  |
|  | \*Medical or Physical Limitations or Conditions Affecting Participation or Requiring a Medical Technician: |  |
|  | \*Allergies (Medication or otherwise) |  |
|  | Other: |  |

All medical, personal and contact information will be protected and remain CONFIDENTIAL, this information will not be published, distributed or disclosed. The use of e-mail will only be to provide notification of events and scheduling of practice or changes to.

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| Questionnaire – Optional  |
|  | Have you ever practiced kendo before?If so, did you attain any grade or rank?If not, how much do you know about kendo?How did you learn about our club?Do you have experience in martial arts, kendo or otherwise (please specify)?Why would you like to learn kendo? |
|  |

**ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM**

I, the undersigned, hereby acknowledge that participation in KENDO requires vigorous exercise and full physical contact, and as such involves some risk of injury or even loss of life. I acknowledge that this activity may involve a test of a person's physical and mental limits. I certify that I am physically able, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity. I certify that I will follow the instructions provided by the instructors of THE ROCK KENDO CLUB regarding personal safety, and I acknowledge that it is my responsibility to maintain my own Kendo equipment or any Kendo equipment loaned or rented to me by THE ROCK KENDO CLUB in a safe condition to prevent injuries to myself and others. I acknowledge that it is my own responsibility to ensure I am in such physical condition as to not present any undue health or injury risk to myself or others while taking part in Kendo.

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THE ROCK KENDO CLUB, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I acknowledge that THE ROCK KENDO and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the activity. These risks are not only inherent to participants but are also present for volunteers.

IN CASE OF INJURY, SHOULD I BE UNABLE TO RESPOND, a Club representative has my permission to provide immediate medical assistance and to determine if further medical assistance and/or transportation for medical treatment is required. I understand and agree that I am responsible for any associated costs for this action.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity. In consideration of my application and permitting me to participate in this activity, I hereby act for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, THE FOLLOWING ENTITIES OR PERSONS: THE ROCK KENDO CLUB and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

The above being fully acknowledged, I hereby release THE ROCK KENDO CLUB and its affiliates, their officers, instructors, members, and agents as well as the NL SPORTS CENTRE, their officers, instructors, members, and agents from any and all claims, damages and expenses upon my death, bodily or mental injury, or loss or damage to my property or that property entrusted to my care, or to that of any property or venue at which activities take place, that is a result of my participation in Kendo.

I, the undersigned do hereby voluntarily submit my application for attendance and participation in the training of THE ROCK KENDO CLUB. I understand that fees are due and payable upon beginning of the first class. Thereafter dues will fall due on the first of the month.

I have read and understood the terms and conditions as provided by The Rock Kendo Club and I agree to all of the terms. I also verify that all information given is accurate and precise.

|  |
| --- |
| Participant Name & Signature: |
|  |
| Date: | YYYY / MM / DD |
| Parent/Guardian Name & Signature (If Member is under 18): |
|  |
| Date: |  YYYY / MM / DD |

The Rock Kendo Club

90 Crosbie Road, St. John’s, Newfoundland, A1E 2X3

709 728 8304

[www.therockkendo.com](http://www.therockkendo.com)

**Registration and Equipment Purchase Form**

The Rock Kendo is a not-for-profit group, fees go completely towards providing training equipment, seminars, camps, booking of facilities or venues, and to cover other charges which may be incurred facilitating practice such as dues to the Canadian Kendo Federation.

**Schedule of Fees**

|  |  |  |
| --- | --- | --- |
| Regular Membership |  | $35.00 Monthly |
| CKF Membership\* |  | $50.00 Annually |
| Children’s Class |  | $55.00 Semesterly (excludes equipment) \*\* |

*\*Dues to the CKF are paid by the individual directly to the Canadian Kendo Federation and must be paid to attend gradings and be awarded ranks.* ***Only required of regular members.***

*\*\*Cost of equipment may be added to fee at time of registration, if purchased at such time shipping will be free, otherwise shipping charges may apply.*

I would like to pay for the following,

**Registration type**

Regular Membership…………………………………. $35.00

Children’s Class…………………………………………. $55.00

**Standard Equipment**†

 Standard Practice Shinai (mandatory item) … $25.00

I will also need a†

 Cloth Shinai bag ………………………………………… $7.00

Bokuto……………………………………………………….. $37.00

Kendogi Set……………………………………………….. $88.00

Name of payer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

In registering for the Children’s Class above I hereby include a $30.00 non-refundable deposit to secure a spot for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*participants name*).

All Cheques can be made payable to “The Rock Kendo Club – Wilson Humphries”.

E-transfers are also accepted at “whumphries@mun.ca”.

† Prices based off primary supplier and may differ – Bogushop [*http://www.bogushop.com*](http://www.bogushop.com)

Preparing for Your First Kendo Lesson

 Kendo is a lot of fun and a great challenge, it also requires relatively little to get started and pursue. Though students should be aware of some things before coming to practice which will help them acclimate and navigate their first class.

1. Bring the completed membership / waiver form to class if it has not yet been submitted.
2. Dress in loose clothes (t-shirt & sports pants, shorts are permitted).
3. If the shinai is new, remove all plastic wrappings. There is a thread-like string wrapped around the shinai (red or black). They hold the bamboo together and can be removed.
4. The shinai comes with a plastic tsuba (hand guard) and dome (rubber stopper), they are placed on the handle to complete the assembly of the shinai.
5. Before entering the gym, remove footwear and leave outside the gym, all training is done in bare feet.
6. Always carry your shinai in the left hand (the side where the sword normally rests).
7. Bow when you step into the dojo and bow when leaving (face into the dojo when you do either).
8. When the class starts, taiso will be announced and everyone does the warm-up together. Follow as best as possible and do not worry about making mistakes during the exercise.
9. Sei retsu is called, line up facing the sensei with the rest of the members. As a new junior member, you should go straight to end of the line. The most senior on right & most junior on the left. Be mindful of adequate spacing, and straight alignment with person on right.
10. Seiza (kneel), place shinai on the floor on your left side, place hands on your lap.
11. Mokuso, mediate in silence with the group, hands at enzo (make a circle).
12. Shomen ni rei, bow to front of dojo, sensei ni rei, bow to the sensei. Class then starts
13. When the training is ending, steps 9 to 12 are done again. However bowing order is reversed, and an additional bow included, otagai ni rei, bow to the person on either side of you.
14. Class is dismissed.
15. Kendo is conducted using as much Japanese wherever possible, aside from the above-mentioned terms some Japanese Words You Should Learn are:
	1. Counting: The following is a list of the English numbers one through ten in their equivalent Japanese.

Ichi: One Ni: Two San: Three Shi: Four Go: Five

Roku: Six Shichi: Seven Hachi: Eight Kyuu: Nine Juu: Ten

* 1. Hajime: Start
	2. Yame: Stop
	3. Hai: Yes – say in response to commands or instructions and with vigor
1. When in doubt for etiquette bow, it never hurts.
2. Please feel free to ask senior members any questions you may have.