

AUGUST 13 - 19, 2017 APPLICATION

Online registration is also available at www.kokushikai.com

Please print legibly and mail this completed form to:

Kokushikai Judo Camp, 24-28 Fair Lawn Ave., Fair Lawn, NJ 07410 or e-mail to camp@kokushikai.com Include credit card information or enclose a check/money order made payable to KOKUSHIKAI JUDO CAMP

Camper			M F	Free T-shirt if registered by
Last	First	Initial		August 1, 2016
Address				☐ Youth S
Street		Apt #		☐ Youth M
City	 State			☐ Youth L
•		Zip		☐ Adult S
Home Phone () E-mail				☐ Adult M
Age Birth Date//	Judo Rank	_ Jiujitsu Rank		☐ Adult L
Height (feet/inches)	Weight (kilos)	_		☐ Adult XL ☐ Adult XXL
Primary Judo or Jiujitsu Club Instructor's Name				□ Addit AAL
Emergency Contact Information				Please list Top 3 Competition Results:
Name	Phone ()	Relationship		
Roommate Request Names must app	ear on both camper's forms.			
RELEASE &				
PAYMENT IN	FORMATIO	N		
Cabin Room Rate \$675				(This information helps us place the participant in the correct training group)
Semi-Private Room Rate (Indicate Roommate Above) \$725				Please include my contribu-
			tion to the KJC Jeff Wolfe Youth Scholarship Fund.	
One Way Transportation Service \$65 / Ple			Amount \$	
Round Trip T			Initials:	
Canteen Tab (Campers can make purchases at the Camp Store on credit of any amount. Unused balances will be refunded.)				(Thank-you! Your contribution helps our efforts to reach and develop as many judo players as pos- sible in the pursuit of excellence year after year.
	Apply Eligible/Approved Discounts	()		Your donations are greatly appreciated. Please note that donations are NOT tax-deductible.)
	Total			
☐ I am paying in full today				
	posit and am responsible for the balance	of \$by Au	gust 6, 2017	
Payment Method: Check/money order in the amount of \$	enclosed.	Credi	t Card, circle type	MC Visa
Credit Card #		Verification Code	Exp Date	/
Print Name on Credit Card		Aı	mount Charged \$	
Standard Release and Waiver of Liability:				

I give permission for the above-named camper to attend camp. A deposit of \$100 is REQUIRED with application. Full payment of balance is due by August 6, 2017. There will be absolutely no refunds after August 6, 2017. No refunds will be given if a camper is dismissed for disciplinary reasons. In consideration of the good will, public service and community aid provided by Kokushikai, Inc., I grant permission to take and publish photographs, videotapes and recordings of the camper registered above. I acknowledge that Kokushikai, Inc. will be the sole owner of all rights arising of their use for all purposes and that I shall receive no compensation for their use. I hereby submit my application for participation in Kokushikai Judo Camp. In consideration of acceptance of my said application, I do hereby waive, release and forever discharge on behalf of myself, my heirs, my executors, my administrators, and my assigns any and all claims, rights or causes of action whatsoever for any damages or injuries whatsoever which I may now have or which might arise hereafter against any person or entity in any way connected with USA Judo, USJA, USJF, Kokushikai Judo Camp, Kokushikai Judo Academy or Camp Wayne for Boys, which shall include but not be limited to: Kokushikai, Inc and any instructors, assistants and fellow student practitioners associated therewith as a result of my participation in Kokushikai Judo Camp. I hereby state that I have read this "Waiver of Liability" in its entirety and that I fully understand the meaning thereof. Furthermore, I understand that I will not be allowed to participate at Kokushikai Judo Camp unless I have signed and executed this "Waiver of Liability".