

Name

Boston Kendo Kyokai

Membership Application

Address				
City				
State				
Zip				
Date of birth		Gender	M □	$F \square$
Kendo Rank		Date of Rank		
H Phone				
W Phone				
E-Mail				
knowledge of the nat membership in Bosto myself, my heirs, rep harmless Boston Ken Federation, their offic whatsoever, which I, the future against the any kind, arising out participation is super	OWLEDGE AND AGREE that ure and the extent of all the risks on Kendo Kyokai, I,	associated with kendo. ators and assigns, do he d States Kendo Federat any cause of action, cla ors, administrators and of personal injury, pro rticipation in Boston Ke the injury or damage i	Therefore, in, the undersereby release, tion, the All Unims, or dema assigns may reperty damage endo Kyokai, s caused.	consideration of my signed on behalf of indemnify, and hold United States Kendo ands of any nature now have, or have in , death or accident of whether that
I further certify that I participation.	I am in good health and that I hav	e no physical limitation	s, which wou	ld preclude my safe
agreement. I further u	am therefore of lawful age (18 y understand that the terms of this a agreement, after having carefully	greement are legally bi	nding and I co	ertify that I am
Signature (Parent or Gu	nardian if under 18)	Date		