

**2024 SHO-REI-SHOBU-KAN
NATIONAL CONVENTION
REGISTRATION FORM**

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

E-Mail: _____

Home Dojo/Instructor: _____

Your Rank: _____

Registration fee for a member dojo is \$150 per individual or \$250 for a family. Non-member registration fee \$200 per person. Saturday only youth training fee is \$45.00. If you desire to test for your next rank, additional testing fees will apply and are mandatory.

Checks should be made payable to: Sho-Rei-Shobu-Kan Budo Organization or SRSBK

Please register by June 15, 2024. There is a \$25 late fee for registrations after June 15. Send registration form, liability release and registration fee to:

Lincoln Martial Arts Center
4815 S. 14th Street, Suite D
Lincoln, NE 68512
(402) 474-5425

Or Register online at: www.lincolnmartialartscenter.com/events

Convention Location: **Lincoln Martial Arts Center**
4815 S. 14th Street, Suite D
Lincoln, NE 68512

Schedule:

DATE	TIME	EVENT
Thursday, June 20th	5 PM - 9 PM	Test Review (for candidates but open to everyone)
Friday, June 21st	9 AM – 5 PM 6 PM – 7 PM	Convention Seminar Dan Meeting
Saturday, June 22nd	9 AM – 12 PM 1 PM – 5 PM 6 PM – 8 PM	Convention Seminar Training & Testing (everyone should participate!) Fellowship Dinner (buffet at 6:30 p.m.)
Sunday, June 23rd	9 AM – 12 PM	Training & Presentations

**2024 SHO-REI-SHOBU-KAN
NATIONAL CONVENTION
Liability Release**

Liability Release

The undersigned and in the event the undersigned is under twenty-one years of age, the undersigned's parent(s) or guardian(s), for, in consideration of participating in the Sho-Rei-Shobu-Kan International Convention, hereby hold(s) harmless and indemnifies the organization, the officers and employees thereof, the corporation, instructors and other members and/or students, either individually or jointly, from and against any and all claims and demands whatsoever, including, but not limited to those arising from any accident, illness, injury to or death of any person or persons resulting directly or indirectly from participation in training or any other activity related to this convention and occurring during said participation or any other time subsequent thereto. Further, the undersigned understand(s) there is a certain element of danger in the martial arts and sports and acknowledges that it has been explained that caution reduces the element of danger and injury. It is also understood that the Organization, school or corporation reserves the right to remove participant from this event for any action deemed undesirable. The undersigned stipulates that he/she is physically sound and has medical approval to proceed with normal, routine exercise. It is further understood that there are no refunds for this event.

Signature of Student: _____

Signature of Parent/Guardian: _____

Date: _____
 Month Day Year

Emergency Contact: Name _____ Phone _____