



## 2026 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 \$175 per individual or \$275 for a family. Non-member registration fee \$225 per person. Saturday only youth training fee is \$45.00. Additional fees will apply for those recommended for testing.

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

Please register by June 20, 2026. There is a \$25 late fee for registrations after June 20. Send registration form, liability release and registration fee to:

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

Or Register online at: [www.lincolnmartialartscenter.com/events](http://www.lincolnmartialartscenter.com/events)

Convention Location: Lincoln Martial Arts Center  
4815 S. 14<sup>th</sup> Street, Suite D  
Lincoln, NE 68512

Schedule:

DATE	TIME	EVENT
Thursday, June 25th	5 PM - 8 PM	Test Review (for candidates but open to everyone)
Friday, June 26th	9 AM – 5 PM 6 PM – 7 PM	Convention Seminar Dan Meeting
Saturday, June 27th	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 28th	9 AM – 12 PM	Training & Presentations



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**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 National 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. I also understand that photographs will be taken during the event and used in various media formats to promote the organization.

Signature of Student: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_  
Month                      Day                      Year

Emergency Contact: Name \_\_\_\_\_ Phone \_\_\_\_\_