



Halifax Kendo Club

Registration Form

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Name: _____

Mailing Address: _____

Phone: _____

E-Mail: _____

Date of Birth: _____ (Student Must be at least 6 years of age)

Previous Kendo Experience:



of Years Practiced: _____

Rank: _____

How did you hear about HKC? _____

Payment Information:

- Membership fees are \$75.00 per term.
- One term is three months.
- Terms are January – March, April – June, July – September, October – December.
- Members are expected to register with the CKF and pay their yearly fee of \$35.00 (Done through the CKF website)

Signature: _____

Signature of Parent/Guardian (if required): _____

Date: _____



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Facility Rules

- Club members are not allowed in the facility without an appointed instructor. The following are the ONLY registered instructors:
 - Terence Clarke
 - Adam Nelson
 - Jim Brown
 - Thomas Trappenberg
- Club members are to be in the facility only during scheduled class times. 30 minutes will be allotted before and after class for changing/warm up.
- Class times are Sundays and Thursdays from 6:00pm to 8:00pm.
- Please arrive on time. Club members should be ready to begin class by 6:05pm.
- HKC is responsible financially for any damage to the building. If damage is caused by a student's misbehavior, the student will be billed with the amount owing to the facility and may be removed from classes pending a discussion with the administration.
- HKC is responsible for kendo equipment only. At no time is it acceptable for students to use equipment belonging to the facility or other groups.
- No shoes allowed on the gym floor or stage. Shoes must be removed prior to entering the Dojo.
- No food or drink is allowed inside the gym. Water may be consumed outside the gym on water breaks.

Not adhering to these rules may be grounds for termination of the Halifax Kendo Club. Instructors will be vigilant to ensure these rules are followed at all times.

Date: _____

Signature: _____

Instructor: _____



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THE CANADIAN KENDO FEDERATION

Insurance Policy

The CKF Liability Insurance

A brief description and instructions for obtaining a Certificate of Insurance.

Preamble

Many facilities require user groups (in our case, Kendo, Iaido and Jodo clubs) to carry liability insurance. Even if insurance is not required by the facility where your group trains, liability insurance is important. Because no matter how careful you are, accidents happen. And you can be sued by anyone who claims injury or damages resulting from your activities. You may not be liable, but you will need to be defended in court. A liability policy will pay for this defence as well as any costs awarded against you. In short, liability insurance gives you peace of mind. It is important to understand that what liability insurance IS NOT. It IS NOT accident insurance. It will not pay you if you trip and break your wrist, or cut yourself with a sword. Moreover, it will not pay you if your partners Jo Bokken or Shinai came too close and hit too hard. It will cover your defence if SOMEONE ELSE claims that they were injured (physically or otherwise) by your action or inaction.

Who is covered?

All members in good standing of the CKF that have their dues paid. Any volunteers or employees while working for a CKF member dojo in a capacity related to the dojo activity.

What you need to do?

Nothing specific. **As long as your CKF dues are paid up** you are covered by this liability insurance. In many situations, a facility or an event you are hosting will require a proof of your liability insurance coverage (often referred to as a Certificate of Insurance) in which the facility or organization will be named as co-insured. This document can be easily obtained (allow at least 2 weeks for this). Send the particulars of the event (location, duration etc.) and the details of the co-insured (full name and address) to Natan Cheifetz bokuto@telus.net and a certificate will be forwarded to you.

Make sure that all members of your dojo and all participants in events are covered by checking that their CKF dues are paid for the current year.



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In consideration of the **Halifax Kendo Club** allowing me to participate in their classes, events, and activities, by signing this form I, the undersigned, hereby:

1. Agree to obey all safety requirements set by the **Halifax Kendo Club** and its instructors while participating in **Halifax Kendo Club** classes, events, and activities;
2. Agree to advise the instructors of the **Halifax Kendo Club** of any illness, disease, medical condition (e.g. asthma, heart conditions, pre-existing joint problems), or special requirements that I may have, and that I have consulted a physician on these matters prior to participating in any of the **Halifax Kendo Club** classes, demonstrations, or activities;
3. Understand the potential risk for personal injury, illness and equipment damage while participating in classes, events and activities hosted by the **Halifax Kendo Club**, including but not limited to those injuries noted above, and that I acknowledge and agree that I am participating in **Halifax Kendo Club** classes, events, and activities under CKF Liability Insurance, and shall exercise due diligence in accordance with club safety standards dictated by the instructors.
Concerning 3rd Party Program Insurance (PSP, etc) : **Halifax Kendo Club** is not affiliated with any 3rd party program insurance, and if any physical damages resulting in restricted or terminated work performance is not covered under CKF liability insurance and **Halifax Kendo Club** is released from the responsibility of such unforeseen damages.

Additional Notes (Medical, Allergy, etc.) : _____

Emergency Contact: _____ Phone: _____

I, the undersigned applicant, understand that Kendo is a semi contact sport which may cause bodily injury and that I participate in the sport out of my own free will. I have read and understand the general liability insurance coverage policy. I understand that I, the applicant, am responsible for any physical, personal, or material damages caused by my own negligence. I fully understand that injury resulting in restricted or terminated work performance (though extremely rare) is not at the fault of **Halifax Kendo Club** and release the coordinators of the Club of any responsibility in such case.

Name (print) _____ Signature: _____

Date: _____

Signature of Parent or Guardian (If required): _____

Date: _____