

Please read carefully before signing. You must complete all highlighted areas. This form must be signed, and dated on both sides, or your registration will not be processed. An individual registration form must be completed by each participant. For additional registration forms, please copy, 2-sided only. Additional forms: [www.milwakueshobukan.org/join.html](http://www.milwakueshobukan.org/join.html)

**1**

Participant Name (printed) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Do you have any allergies, physical limitations, medications, or medical conditions of which the dojo should be aware with regard to your safety while training or the safety of others? If these limitations may affect your training or the training of others, you are responsible for making the class instructor aware of them.

No  Yes \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Martial Arts Experience \_\_\_\_\_ Rank \_\_\_\_\_

**2**

**Membership Fee Schedule**

I would like to make my initial payment in the amount of:

**ADULT MEMBERSHIP DUES**

\$60.00 per month

-\$5.00 for Qualifying Membership

-\$10.00 for auto monthly bill pay\*  
-1<sup>st</sup> Month is paid by check or cash  
- Auto pay due 1<sup>st</sup> of the month

\$250.00 when paying for 6 months

**ADULT BEGINNERS – STARTER PACKAGE**

\$275.00 for 6 months  
- includes Dogi/training uniform  
- includes 6<sup>th</sup> Kyu Testing Fee

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**CHILDREN'S PROGRAM**

\$35.00 per Month

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**GUEST / VISITOR**  
Recommended \$10.00 donation, unless otherwise specified for special events.

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Dues must be paid each term before training

**3 Bloodborne Pathogens and Infectious Disease Policy**

To protect the Milwaukee Shobukan, LLC participants against the risk of disease, the following policy has been adopted to minimize the risk of transmission of HIV, hepatitis-B, and other blood- and body fluid-borne pathogens during training. Sweat is generally exempt as it is unavoidable and considered to be a low-vector of bloodborne disease transmission. Current available evidence suggests that the risk of transmission of HIV during the type of body contact that occurs in Aikido training is slight. Milwaukee Shobukan, LLC observes these "universal precautions" as modified for Aikido training. Generally, this means that instructors and all persons training at the facility used by Milwaukee Shobukan, LLC. All exposed bodily fluids should be treated as if they are infected. Specifically, the following measures will be observed at all times:

Preparation for Training

The most frequent points of contact between training partners are the hands. Other exposed parts of the body subject to particular risk of cuts and abrasions are the feet and the area about the face and neck. For these reasons the following procedures must be observed.

1. You will inspect the exposed parts of your body prior to participating in Aikido training to ensure that there are no breaks in your skin such as abrasions, open cuts, or sores.
2. You will inspect your hands and feet to ensure that fingernails and toenails are trimmed and smooth in order not to be a cause of cuts.
3. You will wear a freshly laundered dogi to the first class which you attend each day.
4. You will never enter the training mat wearing a dogi which is actively contaminated by blood or body fluid.

If you have any open cuts or sores, you will clean them with a suitable antiseptic and cover them securely with a leak-proof dressing before coming on the training mat. You will make sure they stay covered while you are training. If your hands or feet have broken skin, suitable taping, gloves or tabi will be worn to cover these areas. If you notice that someone else has an open cut or sore you will immediately advise him or her of the fact and cease training with the individual until the appropriate covering is in place. If a person does not immediately remedy the situation, you will immediately notify the class instructor.

Procedure 1 - Wounds Incurred During Training and/or Contact with Bodily Fluids

If a wound becomes uncovered, open, is bleeding even to a minor extent during training, or if you come in contact with another's bodily fluids:

1. Identify where the fluids originated.

2. The person bleeding and/or the person coming in contact with bodily fluids shall immediately stop training and leave the mat.
3. A person who is bleeding shall take immediate measures to stop the bleeding. If the injured person needs assistance with this procedure, each person assisting shall wear a pair of latex or vinyl gloves (which are available at the dojo first aid station).
4. All used gloves and bloody clothes or dressings shall be carefully disposed of in an appropriate waste receptacle.
5. Anyone who has come in contact with body fluids shall wash the affected area with soap and hot water immediately after the risk of further contact with bodily fluids has ended.
6. Minor blood stains on dogi and other clothing will be treated with a disinfectant solution available at the dojo first aid station.
7. If there are major blood stains or soiling, the dogi and other clothing shall be removed immediately, placed in a leak-proof container, and handled carefully until it can be laundered or disposed of.

Procedure 2 - Procedures for Blood on the Mat

If blood becomes present on the mat during training:

1. The partner of the person bleeding will ensure that other students training do not come into contact with the bodily fluid.
2. The exposed fluid, regardless of amount, will be cleaned up immediately by wiping down the exposed surface with the disinfectant solution provided for that purpose.
3. Each person assisting in this task shall wear latex or vinyl gloves (available at the dojo first aid station) and shall dispose of the gloves and cloths used for cleanup in the manner described in Procedure 1 - Step 4 above.
4. Upon completion of the cleanup, each assisting person shall wash his or her hands with soap and hot water immediately after gloves are removed.

Responsibility for Health and Safety on the Mat

There are diseases and illnesses other than those known to be transmitted through blood and body fluids. You are reminded that you are responsible for not only your own health and safety, but also the health and safety of your training partners. If you know or suspect that you have any illness which might affect or infect others, or which might impair your ability to train safely, you have the obligation to refrain from training until you are not a risk to others.

**I have read, understood, and will comply with every part of this Policy.**

<b>Participant's Name (printed)</b>	<b>Participant's Signature</b>	<b>Date</b>
_____	_____	_____

1. I agree that before using the facilities and equipment I will inspect the facilities and equipment I use, and if I believe anything is unsafe, I will immediately advise the instructor present and will refuse to participate further.
2. I agree that I know and understand and will follow all safety procedures in using equipment and training weapons at the facility. I agree that at no time will I bring metal weapons or other non-training weapons to the training facility area without the express written consent of Milwaukee Shobukan, LLC. I agree that if there is any questions as to what proper safety procedures are, I will specifically ask the instructor(s) at the training area.
3. I have been advised not to attempt any skill level in training or any other activity of which I am not fully capable. I realize that the study of Aikido requires proper conditioning and training.
4. I fully understand that:
  - a. There are risks and dangers associated with Aikido training including but not limited to bodily injury, communicable diseases, partial or total disability, paralysis, and death.
  - b. That it is possible for a participant to be infected with communicable diseases which can be transmitted by the exchange of blood or other bodily fluids, and that I may be training with them. I acknowledge that I have read and will follow explicitly the Milwaukee Shobukan, LLC. Bloodborne Pathogens and Infectious Disease Policy found within this document.
  - c. There is a potential for severe social and economic losses and damages which could result from the risks and dangers described above;
  - d. These risks and dangers may be caused by me, my training partner, others who are training or doing any other activity around me, instructors, or by the Milwaukee Shobukan, LLC.
  - e. There may be other risks not known or foreseeable at this time which could arise.
5. I expressly and voluntarily assume all risks of death, illness, and/or injury sustained while participating in or observing Aikido training.
6. I release Milwaukee Shobukan, LLC., its representatives, agents, employees, instructors, guest instructors and other participants, or owners or lessees of the premises (hereafter referred to as 'the released parties') from any and all liability, claims, demands, or actions whatsoever arising out of the damage, loss, injury, or death while on the premises, while participating in Aikido training, or any other activity occurring on the premises.
7. I agree that this Release, Consent and Assumption of Risk Statement covers each and every time that I train or participate in any activity, listed or unlisted, at the Milwaukee Shobukan, LLC.
8. I accept and assume all such risk and responsibility for all losses and damages following any injury, illness, disability, paralysis, or death however caused or alleged to be caused including injuries caused in whole or in part by the Milwaukee Shobukan, LLC., its representatives, agents, employees, instructors, or other participants, or owners or lessees of the premises.
9. I agree to indemnify and hold harmless the released parties from all claims, judgements, and costs including attorney fees incurred in connection with any action brought as a result of my participation at the facility.
10. I agree that I will not sue or make claim against the released parties as the result of my participation in Aikido training.
11. I understand that Aikido is an educational system. I agree to strictly abide by the training rules of the Milwaukee Shobukan, LLC., and to follow explicitly all instructions given by the instructors during the course of my training. I agree to watch out for others in the training area and while training on the mat and to follow all rules written or verbally expressed.
12. In signing this agreement I am stating that I know what I am doing, that I take responsibility for my own acts, that I have read carefully and understand this agreement and that I fully agree with each statement contained in this agreement and that I am responsible for myself and will be considerate of others. I am aware that I may have the agreement reviewed by legal counsel.
13. I understand that this Release, Consent and Assumption of Risk Statement is in effect from the moment I arrive until the moment I leave the facility where classes are held, even if I am not training when something happens.
14. I hereby give my consent to take and use photographs, videos, and/or digital images of me/my child for use in news releases and/or marketing materials. These materials might include printed or electronic publications, web sites, social media, or other electronic communications. I further agree that my name and identity may be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me.
15. I have read and understood, and agree to explicitly follow the Milwaukee Shobukan, LLC. Bloodborne Pathogens and Infectious Disease Policy which is attached and incorporated as if it is fully written out in the body thereof, to this Release, Consent and Assumption of Risk Statement.
16. If any portion of this agreement shall be held to be invalid, illegal or unenforceable to any extent and for any reason by any Court of competent jurisdiction, the remainder of this agreement shall not be affected thereby and shall be enforceable to the full extent permitted by law.

I make this agreement on behalf of myself, my heirs, successors, executors, estate, and dependents. By signing this form I am asserting that I am over the age of 18 and that I am a legal adult.

Participant's Name (printed)	Participant's Signature	Date

## 5

## For Parents or Guardians of Minors

1. We the parents or legal guardian(s) consent to allow this minor individual to participate in Aikido training at the facility used by Milwaukee Shobukan, LLC. We will instruct the minor that they must inspect the facilities or equipment to be used, and if they believe anything to be unsafe, they will immediately advise the class instructor and will refuse to participate further.
2. We have read, and understood each of the paragraphs above and bind ourselves, the minor, and all heirs, successors, executors, the estate, and dependents of the minor to the terms hereof.
3. We agree to hold Milwaukee Shobukan, LLC., its representatives, agents, employees, instructors, guest instructors and other participants, or owners or lessees of the premises harmless from any action brought as a result of participation by this minor while on the premises, while participating in Aikido training, or any other activity occurring on the premises and agree to indemnify and hold harmless from all claims, judgements, and costs including attorney fees incurred in connection with any action brought as a result of the minor's participation at the Milwaukee Shobukan, LLC.

Parent or Guardian Name (printed)	Parent or Guardian Signature	Date