

OGRKK GRADING APPLICATION



Date: _____ Applicant's Name: _____

Address: _____

Email: _____ Phone: _____

Dojo Name: _____ Instructor Name: _____

Current Kobudo Rank: _____ Testing Rank: _____

Years of Kobudo Training: _____ Age: _____ Last Grading Date: _____

Testing Fee of \$100 Included with Application: Yes (Fee Must be Paid with Application)

Remit application and fee to: Steve Wilson, 9331 Summer Meadows Drive, Colorado Springs, CO 80925

Hold Harmless Release and Indemnification

By signing this release I am acknowledging that I have read it in its entirety and understand that this grading is a physical training seminar that involves intensive physical activity where injury or accidental death may occur. The training involves physical exertion and contact. Fully understanding the risk involved I hereby indemnify and hold harmless Steve and Diana Wilson and the Okinawan Goju Ryu Kenkyu Kai, and all participants from any and all liability and responsibility. I also understand that no medical coverage is provided or implied and that each participant is responsible for any and all medical cost that may result from my participation.

Applicants Signature or Legal Guardian if Under 18 Years of Age