

2014 NCIA Iaido Seminar

- Date: July 18 (Fri), 19 (Sat), 20 (Sun), 2014
- Instructor: Tomoharu Ito sensei, 8 dan Iaido, 8 dan Kendo from Tokyo, Japan
- Location: Leigh High School
5210 Leigh Ave, San Jose, CA 95124
- Schedule: July 18 (Fri) 1:00pm – 5:00pm
July 19 (Sat) 9:00am – 5:00pm
July 20 (Sun) 9:00am – 11:00pm
11:30am – 12:00pm [Promotion Exam]
1:00pm – 5:00pm [Kendo keiko with Ito sensei]
- Application Deadline: **July 11 (Fri), 2014**
(applications accepted after 7/11 include \$25 late fee)

All seminar participants must submit:

1. A completed seminar application form
2. Agreement and release from liability form
3. Seminar fee

All promotion examination applicants must meet the following requirements:

1. Complete full or a portion of 3 day seminar
2. Submit a completed promotion examination application form
3. Submit photocopy of existing certificate (Menjo)
4. Submit examination fee (A check of \$30 payable to “Northern California Kendo Federation”)

Mail to: George Nishiura
2063 Admiral Place, San Jose, CA 95133 Email: g_nishiura@yahoo.com

Note: Promotion examination applicants passing the Iaido Exam must submit

1. Certificate payment, payable to “Northern California Kendo Federation”
(Kyu: \$20, 1 Dan: \$30)
2. An essay which must be completed in English

Lodging Information: Campbell Inn - 675 E Campbell Ave, Campbell, CA 95008
(408) 374-4300

Sayonara Dinner: **July 20 (Sun), 7pm,**
New Port Restaurant - 1696 S. Wolfe Rd. Sunnyvale, CA. 94087
(408) 737-9976

Additional Information:

Due to the safety reasons NO SHINKEN (SWORDS WITH SHARP EDGE) is allowed.
Please check all of the equipment being used for safety. We reserve the right to inspect at
anytime when we feel it is necessary.

AGREEMENT AND RELEASE FROM LIABILITY FORM

1. **Voluntary Participation.** I, _____, acknowledge that I have voluntarily applied, or have voluntarily allowed my child _____ to apply, to participate in kendo and/or iaido instruction and training at a dojo or club which is affiliated with the All United States Kendo Federation and the Northern California Kendo Federation (hereinafter, any and all affiliated federations, dojos, and clubs referred to as "AUSKF").

2. **Assumption of Risk.** I AM AWARE THAT PARTICIPATION IN IAIDO, AS IN ANY SPORT OR PHYSICAL ACTIVITY, MAY CAUSE PHYSICAL INJURY, DAMAGE TO PROPERTY, AND IN RARE INSTANCES, EVEN DEATH. I AM VOLUNTARILY PARTICIPATING, OR ALLOWING MY CHILD TO PARTICIPATE, IN THIS ACTIVITY WITH KNOWLEDGE OF THE DANGER INVOLVED, HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY, DAMAGE, AND/OR DEATH, AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE: _____.

3. **Release.** As consideration for being permitted by AUSKF /NCKF to participate in these activities and use related facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against, sue, or attack the property of AUSKF/ NCKF on account of injury, damage, or death resulting from negligence or other acts however caused, by any employee, agent, or contractor of AUSKF/NCKF as a result of my, or my child's, participation in kendo. I hereby release AUSKF/ NCKF from all actions, claims, or demands that I, my assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have for injury, damage, or death resulting from my, or my child's, participation in kendo.

4. **Knowing and Voluntary Execution.** I HAVE CAREFULLY READ THIS RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN AUSKF AND ME, AND SIGN IT OF MY OWN FREE WILL.

Signature of participant, or, if participant
is a minor, signature of participant's parent
or legal guardian.

Date _____

Print name

MEMBERSHIP INFORMATION

Name: _____ Phone: _____

Address: _____ Email: _____

_____ Birth Date: _____

Age: _____ Gender: M / F

Previous Kendo and/or Iaido? No Yes (If yes, provide rank/federation): _____

Are you visiting from another dojo? No Yes (If yes, name of dojo) _____

Health concerns? No Yes _____

Emergency contact: _____
(Required) Name Phone # Relationship:

Iaido 6 Kyu – 1 Dan Examination Application Form

Only seminar participants are eligible to take the promotion examination

Requesting Rank: _____ Exam. Date: _____ Gender: F / M

AUSKF ID No.: _____ Member Kendo Federation: _____ Dojo: _____

Name: _____ Age: _____
Last First Middle

Home address: _____
(Street)

_____ (City) (State) (Zip)

Phone: (____) _____ - _____ E-mail: _____

Date of Birth: _____

Present Rank: _____ Date Received: _____

Place of Practice: _____ How many times a week: _____

List any handicaps, injuries etc.: _____

(Signature of Applicant) (Date)

Print Name: _____

(Signature of Regional Federation President) (Date)

Print Name: _____

- * To avoid mistakes and delays, please print clearly.
- * A Copy of your Menjo (Promotion Certificate) and a check for examination fee (\$30) payable to “Northern California Kendo Federation”. Payment must accompany this form.
- * We cannot process your certificate without your AUSKF ID Number.

Iaido Promotion Examination Written Test Questions

Answer two questions from the group of questions for the rank for which you are testing.

1 Kyu Candidates:

1. List the names of the twelve All Japan Kendo Federation Iaido kata. Include a short English translation for each.
2. Describe the proper way of gripping the katana when cutting.
3. Why are you studying Iaido? What do you hope to accomplish?

1 Dan Candidates:

1. Explain what is meant by the term *saya biki*. Describe its use in one All Japan Kendo Federation Iaido kata.
2. Draw a simple diagram of a katana, label as many parts as you can.
3. What is *kirioroshi*? Describe its use in one All Japan Kendo Federation Iaido kata.

