

# AIKIDO ASSOCIATION OF AMERICA

PRESENTS AN

## AIKIDO SEMINAR



**September 15 – 17, 2017**

The Aikido Association of America is proud to announce a seminar with James Nakayama Sensei, hosted by Jyushinkan Dojo at Utah State University in Logan. Training is open to students of any martial art or rank, from any organization or dojo. New students are encouraged to attend the Friday session as the focus will be on basics.

Nakayama Sensei is the AAA Western Region Shibucho (branch leader). He is ranked nanadan (7th degree black belt) in aikido and godan (5th degree black belt) in iaido. He is docho of Chushinkan Dojo in California.

This seminar has four sections (Friday, Saturday morning, Saturday afternoon, Sunday). Attending any three sections fulfills the AAA/AAI seminar attendance requirement.

### Cost

Entire Seminar: \$70 / \$60 (pre-reg. by 8/31/17)

### Schedule

Friday: Basics (beginners welcome) 7:00 pm – 9:00 pm

Saturday: 10:00 am – 1:00 pm  
3:00 pm – 6:00 pm

Sunday: 10:00 am – 1:00 pm

### Seminar Location

HPER Physical Ed. Complex  
850 East 700 North  
Logan, UT 84321

### Information

Ron Sims 435-770-4922



**AIKIDO ASSOCIATION OF AMERICA**

www.aaa-aikido.com ■ info@aaa-aikido.com ■ 773.523.3141 ■ 1016 W. Belmont Avenue, Chicago, IL 60657

# Nakayama Sensei Seminar Registration Form

**September 15 – September 17, 2017**

This seminar has four sections (Friday, Saturday morning, Saturday afternoon, Sunday).  
Attending any three sections fulfills the AAA/AAI seminar attendance requirement.

**Pre-registration due by 8/31/17**

I would like to register for: <input type="checkbox"/> \$70 /\$60 (pre-reg). Entire Seminar <input type="checkbox"/> \$30 / \$20 (pre-reg) Friday <input type="checkbox"/> \$60 / \$50 (pre-reg) Saturday <input type="checkbox"/> \$30 / \$20 (pre-reg) Sunday <input type="checkbox"/> \$20 USU PE Students	
NAME:	TODAY'S DATE:
MAILING ADDRESS:	
CITY/STATE/ZIP:	
PHONE (circle one): HOME WORK MOBILE	FAX:
E-MAIL:	
MARTIAL ART (circle one): AIKIDO OTHER (please specify):	
DOJO:	RANK:
PAYMENT METHOD: <input type="checkbox"/> CHECK ENCLOSED, payable to Aikido Association of America <input type="checkbox"/> CASH (pay at the door)	
Charge my <input type="checkbox"/> VISA <input type="checkbox"/> MASTER CARD NUMBER:	EXP. DATE:

## Release of Liability (Please read before you sign)

For and in consideration of the permission of the Aikido Association of America, hereinafter called the Association, to use its facilities and of the execution by others of agreements similar hereto, the undersigned hereby agrees that while upon the premises of the Association or while using its facilities or equipment, whether at the Association or at any other location for the purpose of practice or of demonstration, said premises, facilities, and equipment shall be occupied and used at the sole risk and responsibility of the undersigned, and the undersigned hereby releases the Association from any and all claims for personal injury, damage, or loss of any kind or description resulting from being thereon or from such use or from the acts any persons thereon. The undersigned further agrees indemnify and hold harmless the Association and each of its instructors, teachers, officers, directors and members from or against any and all claims made or instituted against it or them arising out of the acts of the undersigned while upon the premises of the Association or while using any of its facilities or equipment, whether at the association or at any other location for the purpose of practice or demonstration, including injury or loss to the undersigned however caused and injury or loss caused by the undersigned to any other person. I certify by my signature that I have read and understand this agreement in its entirety and all my questions regarding it have been fully answered. I understand that the Association documents activities and events involving classes and instruction.

I give the Association permission to use any documentation, such as video taping, photography, or film, in which my image is taken in whatever way the Association wishes. I understand that the Association is the sole owner of this documentation.

Signed:

(Parent or guardian must sign if participant is under 18)

**To pre-register please mail this form with payment to:  
AAA Headquarters, 1016 West Belmont Ave., Chicago, IL 60657**