

Shorinjiryu Karate at the following Dojos

Minnie B. Veal Community Center: 1070 Grove Avenue, Edison, 732-248-7316
 Mondays & Thursdays
 6:30p.m. – 8:30p.m.
 *****AND*****

Thomas Jefferson Middle School: 450 Division Street, Edison, 732-248-7310
 Mondays & Thursdays 6:30 p.m. - 8:30 p.m.

IT IS MANDATORY THAT **EVERY NEW STUDENT** TAKE TWO (2) TRIAL CLASSES PRIOR TO REGISTERING FOR KARATE. PLEASE READ AND SIGN THE ATTACHED WAIVER AND HAND IN TO THE SENSEI AT YOUR TRIAL CLASSES. HE WILL INITIAL THE FORM AFTER BOTH CLASSES ARE COMPLETED. BRING THIS WAIVER TO THE RECREATION OFFICE WHEN YOU REGISTER.

Program fees are due for the full year!!!!!!

(January through December)

***Summer location TBD**

(Some additional obligatory fees may apply; such as, tournament fees and dues)

<u>Edison Residents</u> April through December	\$90.00	<u>Non-Resident</u> April through December	\$120.00
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It is the ultimate purpose of Shorinjiryu Karate-do to develop individuality in mind and body through the study of traditional techniques and the spirit of competition.

Training is offered to children age 9 and over, teenagers and adults. Children and adults will gain confidence and self awareness through physical training and study of forms under the guidance of our experienced staff. Children under the age of 9 may, in some cases participate, provided a parent or guardian takes the class with them. Adults will learn to cope with stress using stretching and breathing techniques. Self defense and traditional weapon training is also incorporated into our program. Students are expected to attend at least (2) classes per week. Sign up online: www.EdisonNJ.org at Community Pass or either mail it or bring it to the Recreation Department, 100 Municipal Blvd. Edison, NJ 08817 (Monday through Friday - 8:00 a.m. - 4:30 p.m.)

PROOF OF RESIDENCY REQUIRED FIRST DAY OF CLASS

OUR BLACK BELT INSTRUCTORS ARE:

Peter McMahon	- 6 th Dan	(MBVCC)
Richard Mills	- 5 th Dan	(Thomas Jefferson)
Jason Berenbach	- 4 th Dan	(Thomas Jefferson)
Christina Daniels	- 4 th Dan	(MBVCC)
Marc Riley	- 3 rd Dan	(Thomas Jefferson)
Vineela Jonnalagadda	- 1 st Dan	(Thomas Jefferson)



Karate Application
(Please Print)

ACCT. # _____

FOR OFFICE USE ONLY - Date Received _____	
Employee's Initials _____	Amt _____
MO#/Ck# _____	Cash _____
CC Type _____	CC (last 4 digits) _____

Name: _____ Male/Female: _____ Date of Birth: _____ Age: _____

Address: _____ City: _____ Zip: _____

Home/Cell Phone #: _____ E-Mail: _____

Emergency Contact Name: _____ Emergency Phone #: _____

I will be attending the Karate Class at: MBVCC _____ TJ _____ RESIDENT \$90 _____ NON-RESIDENT \$120 _____

Please note that you may ONLY attend the center for which you are registered at. If you want to attend classes at both locations, you must register and pay for each location. Payment can only be made at the Recreation Office, 100 Municipal Boulevard, Edison, NJ 08817.

*A Senior Citizen must be an Edison Resident, and have an Edison Senior Citizen ID card and age 65 years and older to have the fee waived.
 *Proof of age and residency required.

I HEREBY GIVE PERMISSION FOR MYSELF/MY CHILD TO PARTICIPATE IN THIS ACTIVITY AND ASSUME THE RISK THEREOF, AND I DO AGREE FOR MYSELF/MY CHILD AT ALL TIMES TO KEEP THE SAID RECREATION DEPARTMENT, PERSONNEL AND THE TOWNSHIP OF EDISON FREE, HARMLESS AND INDEMNIFIED FROM ANY AND ALL LIABILITY FOR ANY INJURY I/MY CHILD MIGHT SUSTAIN AS THE RESULT OF SAID PARTICIPATION. I ALSO GIVE PERMISSION FOR THE POSSIBLE VIDEO/AUDIO OF MYSELF/MY CHILD'S PARTICIPATION IN SAID ACTIVITIES. IN THE CASE OF A MEDICAL EMERGENCY, WHERE I CANNOT BE REACHED, I GIVE PERMISSION FOR IMMEDIATE MEDICAL CARE FOR MY CHILD. IT IS FURTHER UNDERSTOOD AND AGREED THAT EDISON TOWNSHIP DOES NOT PROVIDE ANY INSURANCE COVERAGE FOR THE PARTICIPANT OR ORGANIZATION.

SIGNATURE _____ DATE _____

(UNDER 18 NEEDS PARENT/GUARDIAN SIGNATURE)

PRINT NAME _____

(PARENT/GUARDIAN NAME)

EDISON TOWNSHIP RECREATION DEPARTMENT
 Thomas Lankey, Mayor ~ Edison Municipal Council
 Joyce Fircha, Supervisor