



2018 AAKF Spring Seminar, March 16-18, Madison, WI

Hosted by the AAKF Great Lakes Region and the Madison Japanese Karate Club

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| Seminar Title | <i>Instruction of Traditional Karate with Applications to Kata and Kumite</i> |
| Location | <i>Friday, March 16:</i> <u>Session 1</u> : UW Natatorium, 2000 Observatory Drive, Madison, WI 53706, <u>Session 2</u> : Lathrop Hall, 1050 University Avenue, Madison, WI 53706 <i>Saturday, March 17:</i> West High School, 30 Ash Street, Madison, WI 53726 <i>Sunday, March 18:</i> West High School, 30 Ash Street, Madison, WI 53726 |
| Instructors | <i>AAKF Technical Committee</i> |
| Sessions | Friday, March 16: <u>noon to 3 pm</u> and <u>5 pm to 8 pm</u> (Note: Adults over 18 only) Saturday, March 17: <u>9 am to noon</u> and <u>1 pm to 4 pm</u> (Note: All ages allowed) Sunday, April 27: <u>8 am – noon</u> (Note: All ages allowed) |
| Examinations | Dan ranking and other technical qualification exams (Judges, Examiner, and Coaches) will be conducted from 4:00 to 6:00 pm on Saturday, March 17 <i>Note: Examination fees are according to the AAKF fee schedule, and they are in addition to any participation fees.</i> |
| AAKF Meetings | The AAKF Board of Directors meeting will be after the end of workouts on Saturday, March 17, with the AAKF Technical Committee meeting to follow immediately after |
| Participation Fees | For AAKF members, registration postmarked before or on March 12, or paid online before or on March 14: Adults: \$120 for the whole seminar, \$70 per day Youth/students (High school, college): \$80 for the seminar, \$50 per day For AAKF members, registration postmarked after March 12, or paid online after March 14, or paid at the door: \$150 for the whole seminar, \$90 per day (no youth discount) Non-AAKF members will pay additional \$40 to the fees listed above All current AAKF USA Team members can attend free of charge |
| Method of Payment | Please register and pay online , or mail checks or money orders, payable to the AAKF Great Lakes Region, Inc., together with the waiver/registration form to: AAKF Great Lakes Region c/o Vassil Peytchev 2914 Interlaken Pass Madison, WI 53719 |
| Contact Information | Vassil Peytchev 608-301-5164 vassil@mjkc.madcitykarate.com |



Travel Information

The [Dane County Regional Airport](#) (airport code MSN) is served by all major US airlines and has [direct non-stop flights](#) from the following US cities:

By Air

- Atlanta, GA (ATL) – [Delta](#)
- Charlotte, NC (CLT) – [American](#)
- Chicago, IL (ORD) – [American](#), [United](#)
- Dallas, TX (DFW) – [American](#)
- Denver, CO (DEN) – [Frontier](#), [United](#)
- Detroit, MI (DTW) – [Delta](#)
- Las Vegas, NV (LAS) – [Frontier](#)
- Minneapolis, MN (MSP) – [Delta](#)
- New York, NY (LGA) – [Delta](#)
- Newark, NJ (EWR) – [United](#)
- Orlando, FL (MCO, seasonal) – [Frontier](#)
- Philadelphia, PA (PHL) – [American](#), [Frontier](#) (seasonal)
- Salt Lake City, UT (SLC) – [Delta](#)
- San Francisco, CA (SFO) – [United](#)
- Washington, DC (DCA) – [Delta](#)

The contracted hotel offers free shuttle service to and from the airport. Please contact the hotel directly to arrange shuttle transportation.

By Bus

There are regular bus routes from Chicago ([O'Hare Airport](#), [Midway Airport](#), or [downtown Chicago](#)) and from [Minneapolis or St Paul, MN](#) which arrive in downtown Madison.

By Car

US Interstate 39, 90, and 94 all converge by Madison. Google Maps can help you with [specific directions](#).

Hotel

Comfort Suites - \$89/night

1253 John Q Hammons Drive

Madison, WI 53717

Call hotel directly at +1-608-836-3033

Group name: AAKF National Tournaments

Rooms: Suite with two double beds

Occupancy: 1-4 people

Breakfast: Free breakfast included

Free breakfast, free parking, free WiFi

Cut-off date: March 1st

Didn't make the cut-off date? Please check additional options at

<https://groups.hotels.com/20181310592257/EventPage4164373>



2018 AAKF Spring Seminar, March 16-18, Madison, WI WAIVER AND REGISTRATION FORM

Release of liability for all risks of bodily injury, death, or damages

I, the undersigned, do hereby voluntarily submit my application for attendance and participation in the AAKF National Spring Seminar on March 16, 17, and 18, 2018, hosted by the Madison Japanese Karate Club and the AAKF Great Lakes Region, Inc. I assume full responsibility for any and all damages, injuries and/or losses that I may sustain or incur while attending, participating, or while traveling to and from the above event.

I hereby wave all claims against the UW-Madison Japanese Karate Club, UW-Madison, The Board of Regents of the University of Wisconsin System, its officers, agents and employees, the AAKF Board of Directors, the officers and members of the AAKF, the AAKF Great Lakes Region, Inc., the management, promoters, instructors, students and volunteers, individually or otherwise, for any injuries, damages, losses or death that I may sustain.

If I am injured while participating in the above-mentioned event, I give permission to the above-mentioned party to provide medical and/or athletic training attentions, emergency medical services and transportation to any facility as warranted. Immediate medical attention will be of First Aid treatment only and I fully waive all claims for injuries or damages, which may result from such treatment and rehabilitation that may result from injuries sustained from my participation in this event.

I further consent that my pictures furnished by me or any pictures or video taken of me in connection with the above event can be used for publicity, promotion, television, and commercial use, and I wave compensation in regard thereto.

_____, 2018
NAME - print first and last name of participant Date Signature

Participant's e-mail: _____ Participant's Phone: _____

Emergency Contact Name: _____ Contact Phone: _____

AAKF Member? AAKF Number: Sex: Age: _____

Rank: Dojo: State: _____

Full-time student: Days attending: Friday Saturday Sunday

Seminar Fee: _____ Payment Method: _____ Check Number: _____

If the participant is younger than 18 years of age, a parent or a guardian must sign below:

_____, 2018
Print first and last name of parent or guardian Date Signature