

# Japan Karate Association Shotokan Karate – Do International Summer Seminar 2012: July 12 – July 15

**Location:** Mitchell College  
437 Pequot Avenue  
New London, CT 06320

## **Camp Instructors:**

Mr. Masataka Mori, 9<sup>th</sup> Dan, Chief Instructor  
Mr. Shu Takahashi, 7<sup>th</sup> Dan, USA  
Mr. Douglas Luft, 6<sup>th</sup> Dan, USA  
Mr. Robert Jacobs, 6<sup>th</sup> Dan, USA  
Mr. Eiji Toryu, 6<sup>th</sup> Dan, USA  
Ms. Margaret Thomas, 6<sup>th</sup> Dan, USA

## **Guest Instructors:**

Mr. Satoshi Takahashi – 6<sup>th</sup> Dan  
Instructor, JKA Headquarters

Mr. Yasuoki Takahashi – 8<sup>th</sup> Dan  
Chairman, Tohoku Miyagi-ken  
Japan Karate Association

Mr. Yasuo Sakurai – 7<sup>th</sup> Dan  
Director, Shizuoka-ken, JKA  
Chief Instructor, JKA British  
Columbia, Canada



## **Camp Contents:**

- (1) General Karate – Do,
- (2) Judges, Instructors, Examiners – Qualifications Practice and Test,
- (3) Kyu and Dan examinations,
- (4) Basic techniques and advanced sparring techniques,
- (5) Emphasis on basic and advanced Kata and Kata application, and
- (6) Karate Self Defense.



The Summer Camp purpose is to struggle by strenuous effort for the betterment of manners and technique and to cultivate friendship among participants.

**SHOTOKAN KARATE-DO INTERNATIONAL 2012 SUMMER SEMINAR  
JULY 12<sup>th</sup> – JULY 15<sup>st</sup> @ Mitchell College**

**I. PARTICIPATION FEES\***

	18 years and under	Adults
4 Days.....	\$380.....	\$430
3 Days.....	\$300.....	\$340
2 days .....	\$220.....	\$250
1 day .....	\$120.....	\$130
Half-day cost.....	\$70	

Please note that both Saturday and Sunday classes are full days, not half days.

**\*PLEASE NOTE:**

**Meals are not available for visitors, only for those staying on campus with us.**

**II. COLLEGE DORMITORY FEES\*\* (Room and Board – includes meals)**

4 Nights.....	\$280
3 Nights.....	\$210
2 Nights.....	\$140
1 Night .....	\$70

**\*\*Includes \$5 fee for party. (Party is only for those staying on Campus.)**

Please plan to stay on campus with us!

**III. REGISTRATION DEADLINE**

Registration deadline is Friday, June 1. Pay four (4) days in full by June 1 for a \$30 discount.

**IV. GOODWILL SUMMER CAMP TOURNAMENT**

Saturday July 14, 2:30-4:00pm

Last day to register for the Tournament is Friday July 13. No fee.

**V. EXAMINATIONS**

- Kyu Examination: Saturday, July 14 at 1:45pm
- Dan Examination: Sunday, July 15 at 2:00pm
  - Dan Exam Fees will be announced one month prior to camp.

**VI. JKA QUALIFICATION COURSE (For Instructors And Students Nidan Or Above)**

**PARTICIPATION FEES:** \$120

**EXAMINATION FEES:** \$70 – \$140 each

- Paper test – Judge, Instructor and Examiner Friday, July 13, 2:00-3:30pm
- Skill test – Instructor / Examiner Saturday, July 14, 2:00-2:30pm
- Skill test – Judge Saturday, July 14, 2:30-4:00pm

## GENERAL INFORMATION

- a) You may check into the College dormitory on Wednesday evening, July 11, after 5pm.
- b) Dormitory rooms are **NOT** provided with pillows, towels, linen or blankets.
- c) Lost key fee is \$100.00 and damage deposit is \$100. Due to the high price of lost keys and damage deposit this year, we will request a **check** deposit of \$200 at sign in that will be refunded upon return of the key and room in original condition.
- d) Only participants paying in full for 4 days by June 1, 2012 will receive a \$30 discount on the total participation fee.
- e) **Please make checks payable to "AMERICAN JAPAN KARATE ASSOCIATION #2".**
- f) Personal checks will be accepted on or before June 1, 2012. Any camp fees paid after June 1 must be paid in cash, money order or cashier's check.
- g) **PERSONAL CHECKS WILL NOT BE ACCEPTED AFTER JUNE 1.**
- h) Limited registration will be available at the summer camp.
- i) Participation of non-JKA members is welcomed.
- j) The camp **CHECK-OUT TIME** is Sunday July 15 at 4:00pm.
- l) Please send checks by First-Class Mail (*no need for registered mail*).
- m) Contact Information:  
**JKA SHOTOKAN KARATE-DO INTERNATIONAL**  
Phone: (212) 799-5500  
E-mail: [jkanewyork@yahoo.com](mailto:jkanewyork@yahoo.com)
- n) Please take advantage of less crowded training sessions during the two days of the Seminar. As these sessions are less crowded, they tend to be more effective for the individual. ***To train only on the weekend is a missed opportunity.***

## SHOTOKAN KARATE-DO INTERNATIONAL 2012 SUMMER SEMINAR SCHEDULE

THURSDAY JULY 12	FRIDAY JULY 13	SATURDAY JULY 14	SUNDAY JULY 15
BREAKFAST <u>7:30 – 8:30a</u>	BREAKFAST <u>7:30 – 8:30a</u>	BREAKFAST <u>7:30 – 8:30a</u>	BREAKFAST <u>7:30 – 8:30a</u>
<p style="text-align: center;">CLASS <u>9:30a – 12:00p</u></p> <p><b>Basics:</b> Four Levels: - Black belts - Brown belts - Green belts - White belts</p> <p><b>Kumite:</b> Basic 3-step sparring</p> <p><b>Kata:</b> Black belts: - Bassai Sho - Kanku Sho - Gankaku Brown belts: - Bassai Dai - Kanku Dai - Tekki 2 Green belts: - Heian 4, 5 - Tekki shodan White belts: - Heian 1, 2, &amp; 3</p>	<p style="text-align: center;">CLASS <u>9:30a – 12:00p</u></p> <p><b>Basics:</b> Four Levels: - Black belts - Brown belts - Green belts - White belts</p> <p><b>Kumite:</b> Basic 1-step sparring</p> <p><b>Kata:</b> Black belts: - Sochin - Nijushiho - Wankan Brown belts: - Jion - Empi - Jitte Green belts: - Heian 4, 5 - Tekki nidan White belts: - Heian 3, 4 &amp; 5</p>	<p style="text-align: center;">CLASS <u>9:00 am – 12:00 pm</u></p> <p><b>Basics:</b> Four Levels: - Black belts - Brown belts - Green belts - White belts</p> <p><b>Kumite:</b> Semi-free sparring</p> <p><b>Kata:</b> Black belts: - Gojushiho-dai - Gojushiho-sho Brown belts: - Hangetsu - Favorite kata Green belts: - Bassai-dai - Kanku-dai White belts: - Heian 3, 4 &amp; 5</p>	<p style="text-align: center;">CLASS <u>9:00 am – 12:00 pm</u></p> <p><b>Basics</b> All levels</p> <p><b>Kumite</b> All levels</p> <p><b>Kata:</b> Black belts: - Meikyo - Unsu Brown belts: - Favorite kata - Tekki sandan Green belts: - Favorite kata - Jion - Empi White belts: - Favorite kata - Tekki shodan</p>
LUNCH <u>12:30 – 1:30 pm</u>	LUNCH <u>12:30 – 1:30 pm</u>	LUNCH <u>12:30 – 1:30 pm</u>	LUNCH <u>12:30 – 1:30 pm</u>
QUALIFICATION JUDGE SKILL AND PAPER TEST PRACTICE <u>2:00 – 3:30p</u>	QUALIFICATION -JUDGE SKILL AND PAPER TEST PRACTICE -JUDGE, INSTRUCTOR, EXAMINER PAPER TEST <u>4:00 – 5:30 pm</u>	KYU EXAM <u>2:00 – 2:30 pm</u>  QUALIFICATION SKILL TEST Examiner: <u>2:00-2:30 pm</u> Judge: <u>2:30-4:00 pm</u>	DAN EXAM <u>1:30 – 3:30 pm</u>
<p style="text-align: center;">CLASS <u>3:30 – 5:00p</u></p> <p>Basics, Kata, Kumite including Dan Exam Training</p>	<p style="text-align: center;">CLASS <u>3:30 – 5:00p</u></p> <p>Basics, Kata, Kumite including Dan Exam Training</p>	TOURNAMENT <u>2:30 – 4:00 pm</u>	CHECK-OUT <u>4:00 pm</u>
DINNER <u>6:00 – 7:00 pm</u>	DINNER <u>6:00 – 7:00 pm</u>	DINNER <u>6:00 – 7:00 pm</u> BEACH PARTY!!! <u>7:00 – 9:00 pm</u>	

**SHOTOKAN KARATE-DO INTERNATIONAL 2012 SUMMER SEMINAR APPLICATION FOR PARTICIPATION**

**TO:** AMERICAN JAPAN KARATE ASSOCIATION  
 P.O. Box 368  
 CLOSTER, NJ 07624

**Phone:** (212) 799-5500  
**E-mail:** jkanewyork@yahoo.com

**FROM:** CLUB \_\_\_\_\_

LAST NAME, FIRST NAME	AGE	RANK	START DATE	DAYS	NIGHTS	DEPOSIT FEE	TOTAL FEE
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							
17)							
18)							
19)							
20)							
<b>TOTAL</b>							

**Please make checks payable to "AMERICAN JAPAN KARATE ASSOCIATION #2".**

**Please send checks by FIRST-CLASS mail.**

**RELEASE**

I hereby release, discharge and acquit the American Japan Karate Association, Inc., Mitchell College, and all individuals and groups in any way connected thereto from any and all responsibility regarding any injuries that I may sustain while participating in the 2012 Shotokan Karate-Do International Summer Seminar. I hereby acknowledge that I have read and understand this release.

**CLUB:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NAME (PRINT):** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **WITNESS:** \_\_\_\_\_  
(Legal representative if under 18 years of age)

**MEDICAL TREATMENT RELEASE IF UNDER 18 YEARS OF AGE**

In the event that I am unable to provide parental/guardian consent, I hereby authorize the physician(s)/staff of the designated hospital to provide hospital care to include routine diagnostic procedures and medical treatment as necessary to my minor son, daughter or ward.

\_\_\_\_\_  
**Signature of Parent or Legal Guardian**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name of Parent or Legal Guardian (Print)**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**Address**

**MEDICAL INFORMATION**

I hereby confirm that I have had vaccinations for measles, mumps, rubella, diphtheria and tetanus.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If under 18 years of age: I hereby confirm that my son, daughter or ward has had vaccinations for measles, mumps, rubella, diphtheria and tetanus.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IN CASE OF EMERGENCY**

**Contact:**

**Medical Needs:**

**Name:** \_\_\_\_\_

\_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

\_\_\_\_\_

**Relationship:** \_\_\_\_\_

\_\_\_\_\_