

43rd ISKF MASTER CAMP

INTERNATIONAL GOODWILL TOURNAMENT
JUNE 12-19, 2009 CAMP GREEN LANE, PA. USA

Chief Instructor:
TERUYUKI OKAZAKI

Guest Instructors:
**HIROKAZU KANAZAWA, YUTAKA YAGUCHI
HIDEO OCHI, MASARU MIURA**

Assistant Instructors (ISKF Technical Committee):
**FRANK WOON-A-TAI, JAMES FIELD, MAYNARD MINER, ROBIN RIELLY,
NAJIB AMIN, CATHY CLINE, DEXTER SHIM, GARRY TURNBULL,
HIROYOSHI OKAZAKI, GARY SWAIN, DAVID JONES, LARRY LORETH**



Greetings,

It is my sincere pleasure to welcome you to our 43rd ISKF Master Camp and International Goodwill Tournament. I cannot believe we have come together for 43 years at our Master Camp. We have grown and expanded tremendously since our first camp but I am very happy to say that our principles and integrity has remained in tact. Regardless of rank, culture or language spoken we continue to follow Master Gichin Funakoshi's basic principle, which is to "Seek Perfection of Character". This point I am most proud of. The Dojo Kun and Niju Kun always are at the forefront of our training. Every year the number of camp participants has grown, and yet the tradition carries on and is maintained. This is not so easy to do in this era of technology but with the Dojo Kun and Niju Kun as our foundation it becomes effortless.

Our theme for Master Camp this year is "Tatakai wa kyo-jitsu no soju ikan ni ari" which means: in conflict, you must discern the vulnerable from the invulnerable points. Kyo is open and jitsu is closed so simply put there must be balance in the way we train to understand our opponent in order to react. What may appear as an open moment may be just a tactic of the opponent to provoke an action, and what may appear to be a closed moment may not be so and we must always keep a clear mind to be ready for any situation. This may seem like a complex point, however, it becomes easier to understand only with experience and training. Only experience can help the body to learn to react and also to know the vulnerable moments from the invulnerable. There is no better venue to enhance your karate training experience than at our ISKF Master Camp.

Our Master Camp always has the highest level of Shotokan instructors from all over the world. This year we have the distinct fortune of having instruction from Masters Hirokazu Kanazawa, Yutaka Yaguchi, Hideo Ochi and Masaru Miura. All of these supreme Masters have been to our Master Camp in the past and were very pleased to join us again. Assisting them will be our higher-ranking qualified instructors of the ISKF Technical Committee.

Experience begins at the beginner level, so I hope all Shotokan practitioners, beginner to black belt as well as instructors join us for our 43rd ISKF Master Camp and International Goodwill Tournament. You will achieve the highest level of instruction available as well as have a unique opportunity to share ideas with Shotokan karate-ka from around the world. I am truly looking forward to seeing all of you there.

Sincerely,

Teruyuki Okazaki
Chairman and Chief Instructor
International Shotokan Karate Federation

十三年戦は空実の操縦
如河に在り

DATE:

43rd Annual ISKF Master Camp 2009 is in session from June 12 - 19. For the purpose of calculating payment, each camp day begins at 4:00 p.m.

FACILITIES:

Master Camp is held at Camp Green Lane, a year-round training facility for athletic and youth programs. The cluster of cabins and training facilities includes dojo space, athletic field, tennis, basketball and beach volleyball courts, boating lake and swimming pool. The camp store offers special camp T-shirts, books and other karate related merchandise.

ACCOMMODATIONS & LINEN SERVICE:

Room and board are included in tuition. Students room in cabins with 10 others. Linens must be reserved in advance. Linen service includes: 2 bath towels, 1 face towel, 1 washcloth, 2 bed sheets, 1 blanket, 1 pillow and pillow case. The linen fee is \$15.

RESERVATIONS:

Return an application with \$50.00 (US) deposit before **April 16, 2009** and receive a \$30.00 (US) discount from the full tuition.

CANCELLATIONS:

If you are unable to attend camp for any reason, a refund of your deposit is available minus a \$15.00 (US) clerical fee. **Absolutely No Refunds Will Be Given After May 4, 2009.**

LOCATION:

Camp Green Lane is 45 miles northwest of Philadelphia and 8 miles north of the Pennsylvania Turnpike. All routes to camp are marked with the ISKF logo sign. See directions on page 10.

EMERGENCY CONTACT NUMBER:

Our telephone number at Master Camp is (215) 234-6820. This number is to be used for emergencies ONLY.

VEGETARIAN MEALS:

Ovo/Lacto vegetarian meals are available. There will be some vegan meals and we will do our best to accommodate.

INTERNATIONAL GOODWILL TOURNAMENT (RULED BY ISKF):

43rd Annual Master Camp 2009 will feature an International Goodwill Tournament. The individual portion of the tournament is open to all adult ranks 18 years of age and above (beginners to black belt). Color belts will perform ippon kumite; brown & black belts will free spar. A mouthpiece and **ISKF certified** sparring gloves are mandatory for all participants.

ONLY CAMPERS REGISTERED FOR THE FULL WEEK MAY PARTICIPATE IN THE MASTER CAMP GOODWILL TOURNAMENT.**MEETING:**

The ISKF International Board of Directors meeting will be held Monday, June 15th at 10:00 AM. All country directors / representatives are expected to attend. As this has been a year of many changes and growth, it is extremely important

that all ISKF member countries are represented at this meeting.

TUITION:

	US	Canada	Others
7 days	\$495 (US)	\$475 (US)	\$430 (US)
6	\$490	\$470	\$425
5	\$470	\$450	\$410
4	\$435	\$415	\$375
3	\$375	\$365	\$340
2	\$285	\$270	\$250

Deduct \$30.00 (US) for registration before April 16, 2009. All fees are due in US currency. Please make check or money order payable to **"IKA"** or make payment by credit card (VISA, MASTERCARD, DISCOVER). However, we do not accept American Express.

TYPICAL SCHEDULE:

6:00 a.m.	Wake-up
6:30 a.m.	Training (All Levels)
8:45 a.m.	Breakfast
11:00 a.m.	Optional Training
12:45 p.m.	Lunch
1:45 p.m.	Lecture
3:00 p.m.	Training (Trainees, officially registered by ISKF) (Beginners)
4:30 p.m.	Training (Black Belt/Advanced/Intermediate)
6:45 p.m.	Dinner
8:00 p.m.	Bonfire & Talent Show
10:00 p.m.	Lights Out

SPECIAL ACTIVITY:**Friday**

4:30 p.m. First Training

Saturday

8:00 p.m. Lecture

Sunday

10:00 a.m. Examinations
(Dan/Judge/Instructor/Examiner)

8:00 p.m. Lecture

Monday

11:00 a.m. Special Activities

1:00 p.m. Dan Examination (Godan and above)

8:00 p.m. Bonfire & Talent Show

Wednesday

10:00 a.m. International Goodwill Tournament
(Adult Beginner to Brown Belt)

Thursday

10:00 a.m. International Goodwill Tournament
(Adult Black Belt and Teams)

Judge's Practical Examination

8:00 p.m. Goodwill Celebration

DAN EXAMINATION AND REGISTRATION FEES:

Dan Examination Fees are as follows:

	US/Others	Caribbean
Shodan	\$80.00 (US)	\$60.00 (US)
Nidan	\$100.00	\$70.00
Sandan	\$120.00	\$80.00
Yondan	\$150.00	\$100.00
Godan	\$200.00	\$150.00
Rokudan	\$250.00	\$200.00
Shichidan	\$300.00	\$250.00

Dan Registration Fees are as follows:

	US	All Others
Shodan	\$80.00 (US)	\$60.00 (US)
Nidan	\$110.00	\$70.00
Sandan	\$155.00	\$100.00
Yondan	\$210.00	\$150.00
Godan	\$260.00	\$200.00
Rokudan	\$550.00	\$500.00
Shichidan	\$850.00	\$800.00

Dan (**ranks shodan - yondan**), judge's written, examiner & instructor exams will take place on Sunday, June 14th. Dan (**ranks godan and higher**) exams will take place on Monday, June 15th. The judge's practical will be held during the ISKF International Goodwill Tournament on Thursday, June 18th.

Those who wish to take any of these exams must pre-register by completing the registration form and sending it, along with the exam fee, to ISKF Headquarters **no later than April 16, 2009. No applications or fees will be accepted at The Master Camp site.**

Dan Examinees must have the permission from their country or regional Chief Instructor. Examinees must be ISKF members. A completed dan registration form signed by the examinee's chief instructor along with one (1) photo must be sent with the exam fee and registration fee for dan rank for which you are testing. The dan registration form is included in this brochure. All examinees must have a current ISKF membership card. You will be charged \$40.00 (US) for a replacement card at camp. A mouthpiece & **ISKF certified** sparring gloves are required for all Dan Examinees.

JUDGE, INSTRUCTOR AND EXAMINER FEES:

\$40.00 each

Judge's Examination is open to registered ISKF Instructor Trainees. Since the exam is given in two (2) parts, week-long attendance is necessary to be able to take this exam. Examiner and Instructor Examinations are open to those registered ISKF Instructor Trainees who have completed all other requirements as stated in the ISKF Instructor Trainee Manual. If you are registering to take the

Instructors exam, all completed trainee reports along with a copy of the completed technical subject sheet with signatures must be sent to ISKF Headquarters no later than April 16, 2009.

All Dan, Examiner & Instructor examinees must attend Master Camp for a minimum of 3 days or more to be permitted to take these exams.

IMPORTANT NOTICE!

All individuals with Instructor, Examiner, and/or Judges Certification are required to obtain the ISKF Qualification Card. This card lists the individual's certification in each area and is accepted as proof of such when the services are required in an official capacity during any ISKF event. The ISKF Qualification Card is mandatory and will be required in order to officiate and/or test for a higher level.

The fee for each item of certification is \$40 (US), \$20 (US) for International Instructors/Trainees. Each certification at the highest level achieved will be listed on the card. The fee only applies to the highest level obtained and is not required for each prior level. Listing of all three areas of certification (instructor, examiner, judge) requires a fee of \$120, two areas (instructor, examiner) is \$80, and judging credentials is \$40. The card is valid for three (3) years. If a higher level of certification in any area is obtained within the valid 3-year period of the card, a replacement card reflecting the new rank will be issued with the original expiration date at no additional charge.

Please note: this card is for those who have already tested and passed the judge, instructor and/or examiner exams. New examinees should apply for this card only after certification has been obtained. **If you do not apply for this card within 2 months of passing your qualification exam, your new qualification will not be registered and you will have to re-test for that rank.**

LICENSE QUALIFICATION					
NAME		REGION		CLUB	
COUNTRY					
LICENSE	CLASS	REGISTRATION NUMBER	YEAR OF ACQUISITION	VALID BEFORE	
INSTRUCTOR					
EXAMINER					
JUDGE					
DATE ISSUED			DATE EXPIRED		



国際松涛空道

INTERNATIONAL SHOTOKAN KARATE FEDERATION



**INTERNATIONAL SHOTOKAN KARATE FEDERATION
AND ISKF INSTRUCTOR TRAINING INSTITUTE:**

RECORD OF QUALIFICATION: INSTRUCTOR/EXAMINER/JUDGE

Please type or print clearly.

Name _____ Date of Birth ____/____/____
 Gender M / F Present Rank (dan) _____
 Address _____
 City _____ State _____ Zip _____ Country _____
 Telephone () _____ Fax () _____ E-mail _____
 Dojo _____ Region _____

Judge Qualifications			Instructor Qualifications			Examiner Qualifications		
Date of Exam	Registration Number		Date of Exam	Registration Number		Date of Exam	Registration Number	
D	____/____/____	_____	D	____/____/____	_____	D	____/____/____	_____
C	____/____/____	_____	C	____/____/____	_____	C	____/____/____	_____
B	____/____/____	_____	B	____/____/____	_____	B	____/____/____	_____
A	____/____/____	_____	A	____/____/____	_____	A	____/____/____	_____

I PROMISE THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE AND I WILL CONTINUE TO UPHOLD THE STANDARDS AND HONOR OF THE ISKF.

Signature _____ Date _____

I plan to take the following examination(s):

Examination	1st Time?	Current Rank (if any)	Date of Last Exam
Dan	Y/N		
* Judge	Y/N		
* Instructor	Y/N		
* Examiner	Y/N		

*** If you are planning to take the next level exam and already have qualification in any of these areas, you must present your ISKF qualification card at registration. If you do not have a qualification card, you must order one before camp.**

If you are taking the Dan examination please list previous Dan registration numbers (if applicable):

Rank	Registration Number	Date of Exam	Chief Instructor/Examiner's name
Sho			
Ni			
San			
Yon			
Go			
Roku			

If you are an ISKF member, you must have a current ISKF membership card. You will be charged \$40.00 (US) for a replacement card at camp.

Dan Examinees must include a completed Dan Exam Registration Form signed by their chief instructor with their Camp Registration.

REQUEST FOR DAN REGISTRATION

For purposes of clarity all information must be typewritten. Handwritten forms will be returned.

****All registration forms must be signed by the Chief Instructor of the examinee's club to be accepted.****

Name _____

Address _____ photo

Telephone (____) _____ E-mail _____

Registering for _____ Dan Date of Examination _____

Examiner _____ Instructor _____

****Instructor's Signature _____****

Club Name _____ Country _____ Region _____

PERSONAL INFORMATION

Date of Birth ____/____/____ Sex M____ F____ Height ____ft-____in-____cm Weight _____lbs/kg

Occupation _____

Last School or College _____ Degree _____

KARATE HISTORY

When did you begin karate practice? Year _____ Month _____

Previous Dan Registrations:

	Date of Exam	Reg. No.		Date of Exam	Reg. No.
Sho (1) Dan	_____	_____	Go (5) Dan	_____	_____
Ni (2) Dan	_____	_____	Roku (6) Dan	_____	_____
San (3) Dan	_____	_____	Shichi (7) Dan	_____	_____
Yon (4) Dan	_____	_____			

I REQUEST THAT MY RANK BE LISTED IN THE REGISTER OF THE INTERNATIONAL SHOTOKAN KARATE FEDERATION. I PROMISE TO UPHOLD THE STANDARDS AND HONOR OF THE ISKF.

Student's Signature _____

FOR EXAMINER'S USE ONLY

Rank Awarded _____ Examiner's Signature _____

Promotion by: (circle one) EXAMINATION RECOMMENDATION HONORARY

Remarks:

REGISTRATION FORM:

Name _____ DOB _____ Sex _____ Rank _____
Address _____ City _____ State _____ Zip _____
Region _____ Country _____
Dojo _____ Tel _____ Fax _____
Email _____

Are you a ISKF member? Yes / No Are you a vegetarian? Yes / No

Are you planning on using the shuttle bus? Yes / No

Are you a registered ISKF Instructor or Instructor Trainee? Yes / No

I plan to attend on the following circled days:

June 12 13 14 15 16 17 18 19 Total _____ days

Cabin preference (see camp map on page 9): Cabin Number _____

43ND Annual ISKF Master Camp 2009 T-shirt Order Form:

In order to guarantee your T-shirt, you must pre-order, and include payment with pre-registration. We cannot guarantee availability or size at Master Camp. Pre-order postmarked deadline: April 16, 2009. No shirts will be pre-ordered without payment in advance.

Price per shirt: Pre-ordered \$18.00 (US) / At Camp \$25.00 (US) - subject to availability

T-shirt sizes: Adult S, M, L, XL and XXL

Dojo name: _____ Country _____

- | | | | |
|---------------|------------|-----------|--------------------------|
| 1. Name _____ | Size _____ | Qty _____ | Amount Enclosed \$ _____ |
| 2. Name _____ | Size _____ | Qty _____ | Amount Enclosed \$ _____ |
| 3. Name _____ | Size _____ | Qty _____ | Amount Enclosed \$ _____ |
| 4. Name _____ | Size _____ | Qty _____ | Amount Enclosed \$ _____ |
| 5. Name _____ | Size _____ | Qty _____ | Amount Enclosed \$ _____ |

Payment Form:

Mail with \$50.00 (US) deposit to: ISKF 222 South 45th Street Philadelphia, PA 19104 USA

Camp Deposit/Tuition (from page 2)	\$ _____
Linen Service (\$15)	\$ _____
T-shirt (total amount)	\$ _____
Dan Exam/Registration (from page 3)	\$ _____
Exam Fee (\$40 each category, US and International)	
Judge	\$ _____
Instructor	\$ _____
Examiner	\$ _____

Qualification Card Fee (\$40 US each US category)	
Qualification Card Fee (\$20 US each International category)	
Judge	\$ _____
Instructor	\$ _____
Examiner	\$ _____

Total Amount Enclosed \$ _____

All fees are due in US currency. Please make check or money order payable to "IKA" or make payment by credit card (VISA, MASTER, DISCOVER). We do not accept American Express.

Card # _____ Exp. Date: _____ / _____ / _____

Signature _____

PARTICIPANT'S MEDICAL QUESTIONNAIRE:

To be completed by all adults and guardians of minors attending 43rd Annual ISKF Master Camp 2009

Name _____ Date of Birth _____ Sex _____ Rank _____
Address _____ City _____ State _____ Zip _____
Region _____ Country _____ Dojo _____

Do you have a history of any of the following conditions? Please check either yes or no for each one.
If you answer yes to any, please explain:

Yes No
____ ____ Heart murmur
____ ____ Hypertension
____ ____ Recent infection
____ ____ Bone fracture in the past six months
____ ____ Concussion or severe head injury in the past six months
____ ____ Seizures
____ ____ Eye injury
____ ____ Severe bone bruises requiring padding
____ ____ Kidney injury
____ ____ Allergy to medication (list all):
____ ____ Are you currently taking any medications? If yes please specify _____
____ ____ Other: _____

Date _____
Signature of Participant (Parent or Guardian if under 18 years of age)

WAIVER/RELEASE AGREEMENT:

Event: 43rd Annual International Shotokan Karate Federation Master Camp 2009, International Goodwill Tournament

I understand that there are risks and dangers inherent in martial arts training and in participating in and/or receiving instruction at the EVENT. I understand and agree that by signing this Waiver/Release, I am assuming full responsibility for any and all risk of personal injury or death or for property damage suffered by me while participating in and/or receiving instruction at the EVENT. I expressly acknowledge that my participation in the EVENT may subject me to personal injury or bodily harm and I assume any and all risks of that participation. I also understand that in order to be allowed to participate in and/or receive instruction at the EVENT, I must give up my rights to hold the International Shotokan Karate Federation and its affiliates, East Coast Shotokan Karate Association, Camp Green Lane, and any and all other clubs, schools, instructors, members, judges, officials, representatives and all other participants (collectively the "Releasees") liable for any injury or damage which I may suffer while participating in and/or receiving instruction at the EVENT.

I also understand and agree that by signing the Waiver/Release, I acknowledge that I am solely responsible for having or obtaining all insurance coverage which may be necessary or desirable in connection with my participation in and/or receipt of instruction at the EVENT and for any travel to and from the EVENT and in all lodging or any other activities which may be related directly, indirectly or incidentally to the foregoing. I further understand and agree that any fees or costs required for necessary or requested medical attention shall be my sole responsibility and that I shall not seek indemnification or contribution from any Releasee in connection therewith. I also understand that the Releasees shall not be responsible for any incidental, consequential or exemplary damages of any kind even if they are notified of the possibility of such in advance. I also understand and agree that any damage to any lodging sites or the tournament site that I cause is my full responsibility. In no case are said damages the responsibility of any of the Releasees. I further understand and agree that as consideration for my participation in the EVENT, the International Shotokan Karate Federation and /or its designees shall have the right to use my name, image or likeness in the promotion of the EVENT or in any publication relating to the EVENT (or similar Events) and in any broadcast or rebroadcast transmission of the EVENT without any additional consideration to me for the use of my said name, image or likeness.

I understand and agree that this Waiver/Release will have the effect of releasing, discharging, waiving and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation in and/or receipt of instruction at the EVENT.

Knowing this, and in consideration of being permitted to participate in and/or receive instruction at the EVENT, I hereby release and agree to indemnify and hold harmless the above-named Releasees individually and their entities, and their officers, agents, principals, partners, shareholders, directors and employees from any and all liability or costs, including attorney fees, associated with or arising from my participation in and/or receipt of instruction at the EVENT. I further understand and agree that this Waiver/Release will be binding on me, my spouse, my heirs, my personal representative, my assigns, my children and any guardian ad litem for said children.

I understand that if I am signing this Waiver/Release on behalf of my minor child, that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf.

I acknowledge that I have read this Waiver/Release Agreement and that I understand the words and language in it.

Print Name _____ Date _____

Sign Name _____ Witness _____

THIS FORM IS FOR MINOR PARTICIPANTS AND MUST BE FILLED OUT BY PARENT OR LEGAL GUARDIAN. PLEASE PRINT CLEARLY. ALL INFORMATION MUST BE SUPPLIED.

EMERGENCY CONTACT AND MEDICAL INFORMATION:

Name of Parent/Legal Guardian: _____

Address: _____ City _____ State _____ Zip _____

Telephone _____ (day) _____ (night) Child's Name: _____

Any recent or present condition or injury: _____

My child is allergic to the following medications: _____

My child routinely takes the following medication: _____

Her/his last tetanus immunization was: _____

GRAND VIEW HOSPITAL, SELLERSVILLE, PA. PARENTAL CONSENT FOR EMERGENCY TREATMENT:

Date: ____/____/____

I hereby give permission to the Emergency Department at Grand View Hospital to treat my son/daughter (name of minor):

Last Name _____ First Name _____

while we are away. I understand this permission covers the average emergency such as strain, sprain, cut, bruise, scrape, bump, skin rash such as impetigo, poison oak or ivy, bites such as bee stings and snake bites, allergic reactions, foreign bodies in the eye or skin, upset stomach, diarrhea, pink eye, minor burns, sunburn, suspected minor fractures, minor concussions, fevers, diagnostic x-rays, suturing, and the like. I give permission for my child to receive a tetanus booster (if needed). This permission is valid for 6 months only. I also understand that in cases of major significance such as a fracture, appendicitis, or any illness or injury requiring admission that additional consents will be necessary for treatment and that the hospital will make every attempt to reach me. I can be reached at the above address.

Authorization is hereby given to release to:

_____ (insurance company) _____ (policy number)

any information needed to complete hospitalization claims.

Finally, I understand in cases of acute emergency when hospital personnel have attempted to notify me and are unable to reach me, that this permission form will suffice for treatment until such time as I am able to be reached. While we are away, (name of minor):

Last Name _____ First Name _____

is under care of: East Coast Shotokan Karate Federation.

This form is for minor participants and must be filled out by Parent or Legal Guardian. Please print clearly. All information must be supplied.

**INTERNATIONAL SHOTOKAN KARATE FEDERATION/
EAST COAST SHOTOKAN KARATE ASSOCIATION PARENTAL CONSENT FORM:**

First Aid

I hereby give permission for the International Shotokan Karate Federation/East Coast Shotokan Karate Association (hereinafter "ISKF/ECSKA") doctor or nurse to administer minor first aid and/or seek emergency medical care for my son/daughter (name of minor):

Last Name _____ First Name _____

during his/her stay at the 43rd Annual ISKF Master Camp 2009 and International Goodwill Tournament being held at Camp Green Lane June 12-19, 2009. I understand that this permission covers the average emergency such as, but not limited to, strains, sprains, cuts, bruises, scrapes, bumps, skin rashes, minor bites, allergic reactions, upset stomach, diarrhea, minor burns, suspected minor fractures, fevers, and other similar occurrences. This permission is valid only for the duration of the ISKF/ECSKA event or activity described above.

Emergency Care

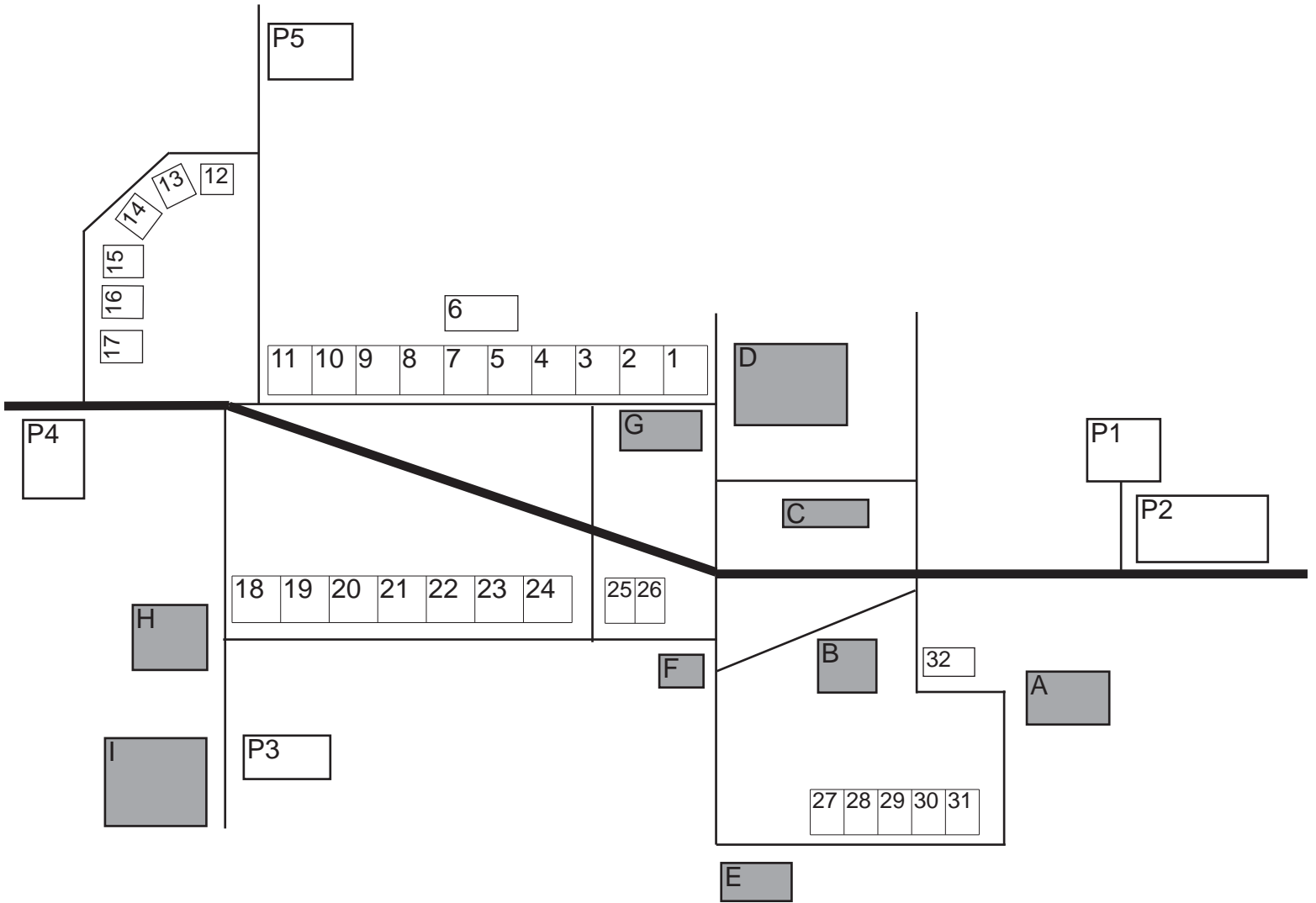
In the event that my child needs emergency medical care, as determined by the ISKF/ECSKA doctor/nurse, supervisory staff or administrators, I hereby give permission for said child to be treated in the emergency room and by the medical professionals of the hospital or medical center nearest to or most easily accessible to the ISKF/ECSKA event or activity described above. This permission includes, but is not limited to, fractures, snake bites, allergic reactions, minor concussions, contusions, lacerations, foreign bodies in the eyes or skin, fevers, diagnostic x-rays, suturing, minor burns, etc. I also give permission for my child to receive a tetanus booster (if needed).

I understand that in cases of major significance, such as a fracture, appendicitis, or any illness or injury which would require admission to a hospital, more consents will be necessary for treatment. If such a situation should arise, I further understand that the ISKF/ECSKA doctor/nurse, supervisory staff and/or administrators, and the hospital will make every attempt to reach me.

I hereby release THE CAMP (43rd Annual ISKF Master Camp 2009 and International Goodwill Tournament, ISKF/ECSKA and Camp Green Lane) from any and all liabilities due to personal injury, bodily harm, or lost or stolen articles.

Signature of Parent/Legal Guardian

CAMP MAP



- A - OKAZAKI DOME
- B - CAMP STORE
- C - MEDICAL
- D - MESS HALL
- E - LAKE SIDE
- F - TELEPHONE
- G - REGISTRATION
- H - NAKAYAMA DOME
- I - SHOTO DOME
- P1,2,3,4,5 - PARKING

MASTER CAMP INFORMATION:

WHAT TO BRING

- At least 2 gis - White only
- Casual clothes—expect temperatures in the 80's by day, in the 60's by night. Rain is always a possibility
- Towels and personal toiletries
- Running shoes (you wouldn't want to miss the morning jog!)
- Flashlight
- Money—the camp store will be selling gis, books and - other items. T-shirts should be pre-ordered (see page 6)
- Linens, blankets (or sleeping bag) and pillow. There will be a limited number of linens available for a \$15.00 rental fee, but we strongly suggest bringing your own. Linens must be pre-ordered, and paid for in advance with registration fees.
- If you are taking any kind of medication, be sure to bring an ample supply with you and inform the camp physician upon your arrival.

CAMP RULES

- Complete Master Camp rules will be distributed at registration. There are a few items below which deserve your special attention.
- The most senior person in each cabin is the designated Cabin Captain and is responsible for the conduct of the members of that cabin, especially in regard to the items below.
- Campers are expected to clean their cabins before leaving Camp. Necessary equipment will be provided.
- Each camper will serve as a waiter. This is not only part of your tuition but also part of your training. No one is excused from his or her assignment.
- No one should find it necessary to wander beyond the perimeter of the campgrounds. The camp road is a public access road, please exercise caution when crossing.
- All Judges participating in the Goodwill Tournament must present their ISKF Qualification card unless you are taking the Judges Examination for the first time.

If you have any questions or concerns, feel free to contact us by mail, phone, fax or e-mail at:

ISKF 222 South 45th Street
Philadelphia, PA 19104 USA

Tel/215.222.9382 Fax/215.222.7813
E-mail/iskf@iskf.com www.iskf.com

DIRECTIONS TO CAMP GREEN LANE:

FROM THE NORTHEAST EXTENSION 476 (ROUTE 9) / PA. TURNPIKE

Northeast Extension 476 (Route 9) North to Lansdale Exit #31. Turn right (from exit) onto Route 63 West. After several miles (and about 15 minutes), turn right onto Route 563 North. Left on Township Line Road. Stay to the right, and the Camp entrance is approximately 3/4 mile, marked by large sign.

To get to the Northeast Extension:

FROM PHILADELPHIA AND SOUTH JERSEY

Take Route 76/Schuylkill Expressway West to Interstate 476 (Route 9) North (Exit 28B). Go through toll booth. Follow directions above.

FROM NORTHEAST PHILADELPHIA

Pennsylvania Turnpike West to Northeast Extension 476 (Route 9) North (Exit 25A). Follow directions above.

FROM NEW YORK, NORTHERN NEW JERSEY, WEST CHESTER COUNTY, NY

New Jersey Turnpike to PA Turnpike, Exit 6. PA Turnpike West to Northeast Extension 476 (Route 9) North (Exit 25A). Follow directions above.

FROM BALTIMORE, WASHINGTON, VIRGINIA

Interstate 95 North/East to just past Chester, PA. Take Interstate 476 North (Exit 7).

Take to the end (21 miles) and go through toll booth for Northeast Extension. Follow directions above.

FROM HARRISBURG, YORK, WESTERN PA

Pennsylvania Turnpike East to Northeast Extension 476 (Route 9) North (Exit 25A). Follow directions above.

**For More Info. go to WWW.MAPQUEST.COM and type:
249 Camp Green Lane Road
Green Lane, PA 18054**

TRANSPORTATION SHUTTLE:

ISKF Shuttle Bus will leave ISKF Headquarters for Camp Green Lane according to the following schedule:

Friday, June 12th

11 am to 11 pm, every 2 hours

Saturday, June 13th

9 am to 11 pm, every 2 hours

Sunday, June 14th

9 am to 11 pm, every 2 hours

Monday, June 15th to Wednesday June 17th

9 am, 12 pm, 4 pm and 7 pm

Friday, June 19th

10:00 am

***Please note: Due to rising gas prices, if you are planning on using the shuttle bus, you will be charged \$10.00 (US) each way. This must be paid in cash to the van driver.**

Transportation provided to the 30th Street train station and Philadelphia International Airport.