

42ND ANNUAL  
ISKF MASTER CAMP 2008  
INTERNATIONAL GOODWILL TOURNAMENT  
JUNE 6 - 13 AT CAMP GREEN LANE, PENNSYLVANIA, U.S.A.



国際松濤館空手連盟

INTERNATIONAL SHOTOKAN KARATE FEDERATION



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Greetings;

It is my pleasure to welcome everyone to our 42nd ISKF Master Camp and International Goodwill Tournament. Our theme for this year's Master Camp is "Tekki ni yotte tenka seyo" - Move according to your opponent. You may initially take this literally, and think it means only in kumite. However, before you can apply this principle to kumite you must first learn to become flexible mentally so that you can adapt to a situation as it changes. It teaches us to be calm, have a clear mind and react naturally without thinking of a strategy. If you learn to keep an open mind to better respond to every situation, this will bring you success both in kumite and in your every day life.

This theme can also be applied to the changes happening in the ISKF. As you know we have become an independent organization. While we will strive to remain a traditional martial arts organization, in order to grow we must be flexible and open to all things around us without ego or judgment. We have always been an international organization, now we will be a universal organization with many more cultures in our expanding ISKF family. The success and expansion of the ISKF is due to the dedication and expertise of our esteemed instructors, but more than that it is because of the many loyal and enthusiastic members many of whom have remained steadfast and sincere. I know I can count on our veterans to welcome our new ISKF family members and show them how great our organization is.

I would like to extend a heartfelt warm welcome to our new members to our 42nd ISKF Master Camp as well as to our returning members. This is the only weeklong Shotokan Karate training camp with so many high-ranking instructors. This year we are very fortunate to have Master Hirokazu Kanazawa from Japan returning and sharing his great instruction along with our esteemed ISKF Master Yutaka Yaguchi as well as our Technical Committee, the ISKF higher ranking qualified instructors.

I welcome all of you, from beginner to black belt, to join us this year at our 42nd ISKF Master Camp and International Goodwill Tournament. It is a very exciting time for the ISKF and I hope to see all of you there and share this time with us.

Sincerely,

Teruyuki Okazaki  
Chairman and Chief Instructor  
International Shotokan Karate Federation

**DATE:**

42nd Annual ISKF Master Camp 2008 is in session from June 6 - 13. 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, 2008** 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, 2008.**

**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):**

42nd Annual Master Camp 2008 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 sparring gloves (**CLOTH OR CANVAS. NO VINYL WILL BE PERMITTED**) 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 9th 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, 2008. 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, <b>officially registered by ISKF</b> ) (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 8th. Dan (**ranks godan and higher**) exams will take place on Monday, June 9th. The judge's practical will be held during the ISKF International Goodwill Tournament on Thursday, June 12th.

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, 2008. 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 membership card. You will be charged \$40.00 (US) for a replacement card at camp. A mouth-piece & sparring gloves (**CLOTH OR CANVAS, NO VINYL WILL BE PERMITTED**) 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, 2008.

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		


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 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 buss? Yes / No

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

I plan to attend on the following circled days:

June    6      7      8      9      10     11     12     13                      Total \_\_\_\_\_ days

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

**42ND Annual ISKF Master Camp 2008 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, 2008. 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 42nd Annual ISKF Master Camp 2008

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: 42nd Annual International Shotokan Karate Federation Master Camp 2008, 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 42nd Annual ISKF Master Camp 2008 and International Goodwill Tournament being held at Camp Green Lane June 6-13, 2008. 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**

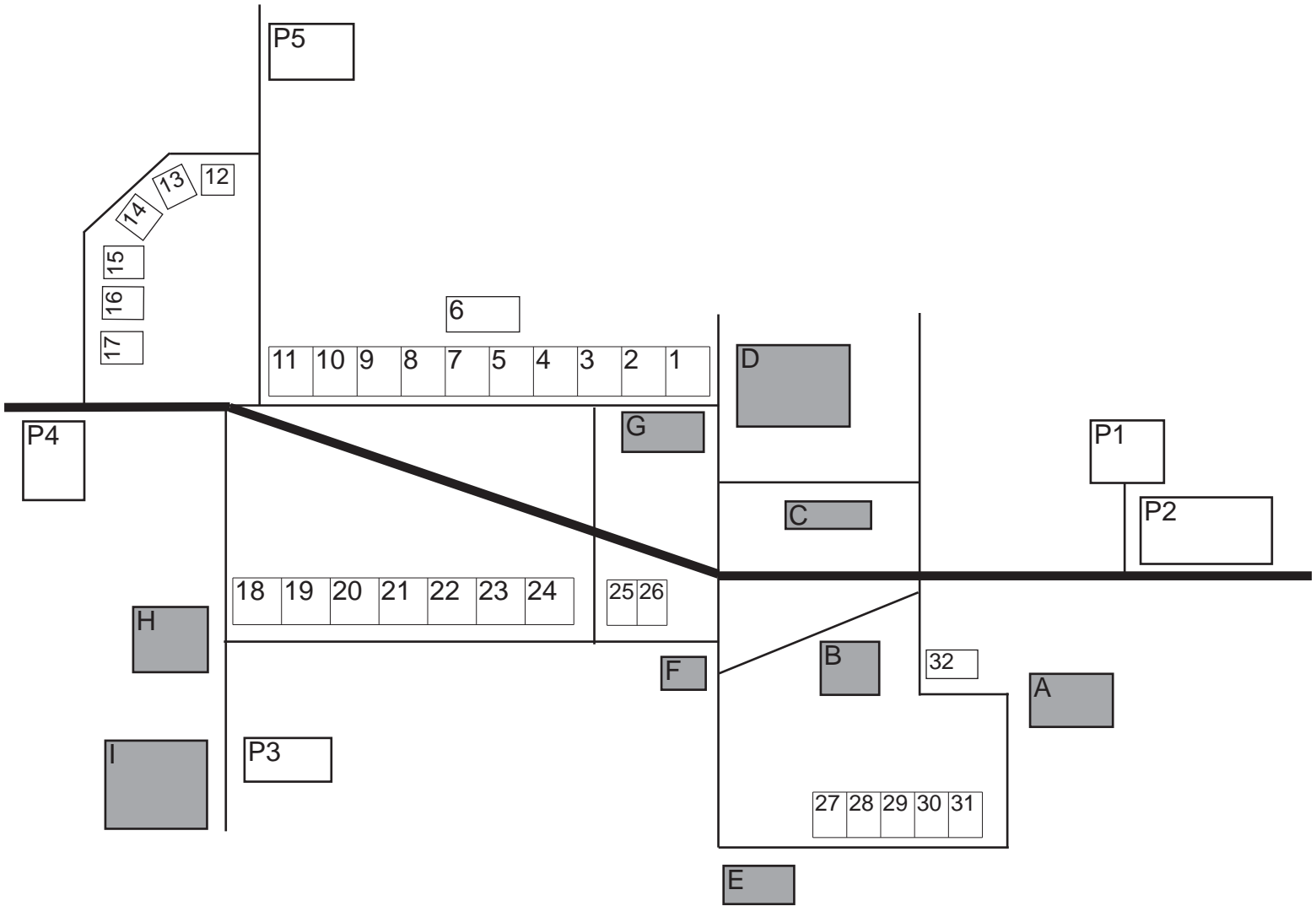
In the event that my child needs emergency medical care, as determined by the ISKF/ECSKA doctor/nurse, supervisory staff or administrators, I hereby give permission for said child to be treated in the emergency room and by the medical professionals of the hospital or medical center nearest to or most 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 (42nd Annual ISKF Master Camp 2008 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](http://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 6th

11 am to 11 pm, every 2 hours

#### Saturday, June 7th

9 am to 11 pm, every 2 hours

#### Sunday, June 8th

9 am to 11 pm, every 2 hours

#### Monday, June 9th to Wednesday June 11th

9 am, 12 pm, 4 pm and 7 pm

#### Friday, June 13th

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.