

JAPAN AIKIDO ASSOCIATION (USA) MEMBERSHIP FORM

Each JAA/USA sensei is responsible for collecting membership dues for his or her club and for remitting said dues to the JAA/USA each year. Individuals not affiliated with a sanctioned JAA/USA club can also use this form to pay for an individual membership.

Annual membership includes the following benefits:

- Four quarterly issues of *The Aikido Times*, the official JAA/USA newsletter.
- Insurance coverage when practicing at your own JAA/USA dojo and when you participate at tournaments and seminars sanctioned by the JAA/USA.
- Discounts on JAA/USA books, DVDs, and merchandise.
- Discounts at all JAA/USA clinics, seminars, and tournaments.

The insurance coverage includes a \$1 million liability benefit and \$2 million aggregate benefit for participants and facilities; a \$25,000 maximum medical expense benefit (\$100 deductible per claim); a \$12,500 accidental death and dismemberment benefit; and a \$25,000 maximum dental coverage benefit. This policy is with a rated insurance company with decades of athletic insurance experience.

THE ANNUAL MEMBERSHIP FEE IS \$20.00 PER PERSON

Please return this form by e-mail to nettles@tomiki.org. Payment can be made by credit card on-line at www.tomiki.org/join.html or by sending a check made out to the "Japan Aikido Association USA" to the address given on the next page. If you are paying for all of the members of your club, then please list the names and e-mail addresses for all the members of your club using the blanks provided on the next page. The name and address to be filled out immediately below this paragraph are for the person making the payment, whether you are a sensei making a payment for your entire club or a non-affiliated individual making a payment for yourself.

Name: _____ **Date:** _____

Address: _____

E-mail Address: _____

Phone Number: _____ **FAX:** _____

Information About Your Dojo or Practice Location:

Dojo Name: _____

Address: _____

Phone Number: _____

Dojo Website: _____

PLEASE MAKE CHECKS PAYABLE TO:

**Japan Aikido Association (USA)
5752 S. Kingston Way
Englewood, CO 80111**

Please indicate how many memberships you are paying for:

Number of memberships: _____

Club Membership List

If you are paying for all the members of your club using this application, then please list their names and addresses below. If you have a big club and need more lines, please add them yourself.

Please note: The JAA/USA newsletter is normally sent out via e-mail as a PDF file to keep expenses down and reduce membership costs. But we understand that some people do not use e-mail and would prefer to receive hard copies via postal mail. So, when filling out the Club Membership List below, please put in an e-mail address for all members who wish to receive the newsletter via e-mail and a mailing address for all people who would prefer to receive the newsletter via postal mail.

NAME	E-mail/Mailing Address
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