

**Shuurin Dojo
Aikido Fellowship Seminar**

**Please join us in celebrating Aikido in the Mid-West
All members regardless of rank or affiliation are invited**

Saturday June 27, 2015

**Classes will be held at Shuurin Dojo
14121 S Street
Omaha, Nebraska 68137
www.shuurindojo.com**

**\$50 For the entire day
\$10 each class**

Guest Instructors:

**Sensei Lloyd McWhirt – Shuurin Dojo
Sensei Claudia Brown – Shuurin Dojo
Sensei Tristan Chermack – Spirit Aikido
Sensei Jaime Obrecht – Capital Aikido Lincoln
Sensei Todd Roberts - Aikido of Nebraska
Sensei Todd Dodson – Platte City Aikikai**

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SCHEDULE:

Saturday June 27, 2015

<<First Session>>

9:30 - 10:25: Sensei Claudia Brown-Jackman

10:30 - 11:25: Sensei Tristan Chermack

11:30 - 12:25: Sensei Todd Roberts

12:30 – 1:30 Lunch Break

<<Second Session>>

1:30 – 2:25: Sensei Jaime Obrecht

2:30 – 3:25: Sensei Todd Dodson

3:30 – 4:25: Sensei Lloyd McWhirt

Please contact with any questions

Sensei Lloyd McWhirt
(402) 630-8592

lloyd@shuurindojo.com

Claudia Brown
(402) 630-3169

Claudia@defenseproject88.com

www.shuurindojo.com

Shuurin Dojo, LLC
Fellowship Seminar Registration Form

Name: _____

Address: _____

Phone: _____

Email: _____

Dojo: _____

\$50 _____ Saturday

\$10 _____ Per Class

TOTAL: _____

Please make checks payable to: Shuurin Dojo LLC.

Dinner Saturday night 6:30pm at:

Sgt. Peffer's Cafe Italian

13760 Millard Ave

Omaha, NE 68137

(402) 932-6211

Number attending: _____

AS A STUDENT
IN THE
SHUURIN DOJO LLC

Please print

Name: _____

Date: _____

If junior member.

Parent's / Guardian's name: _____

WAIVER OF DAMAGE CLAIMS

I understand that in all martial arts training there is the danger of possible bodily injury, and I participate in training voluntarily assuming that risk. In consideration for the instruction which I receive at Shuurin Dojo LLC, I agree that in the event of my sustaining any injury which may result from participation in club activities, I will not bring suit against Shuurin Dojo LLC, its employees, instructors, members, guests or the venue to which the class is being held. I further release its owners and instructors from any and all acts of negligence.

Signature of Applicant: _____

(In case of applicant who is a minor, the undersigned parent or guardian waves and releases all claims of behalf of applicant.)

Signature of Parent or
Guardian of
Applicant: _____

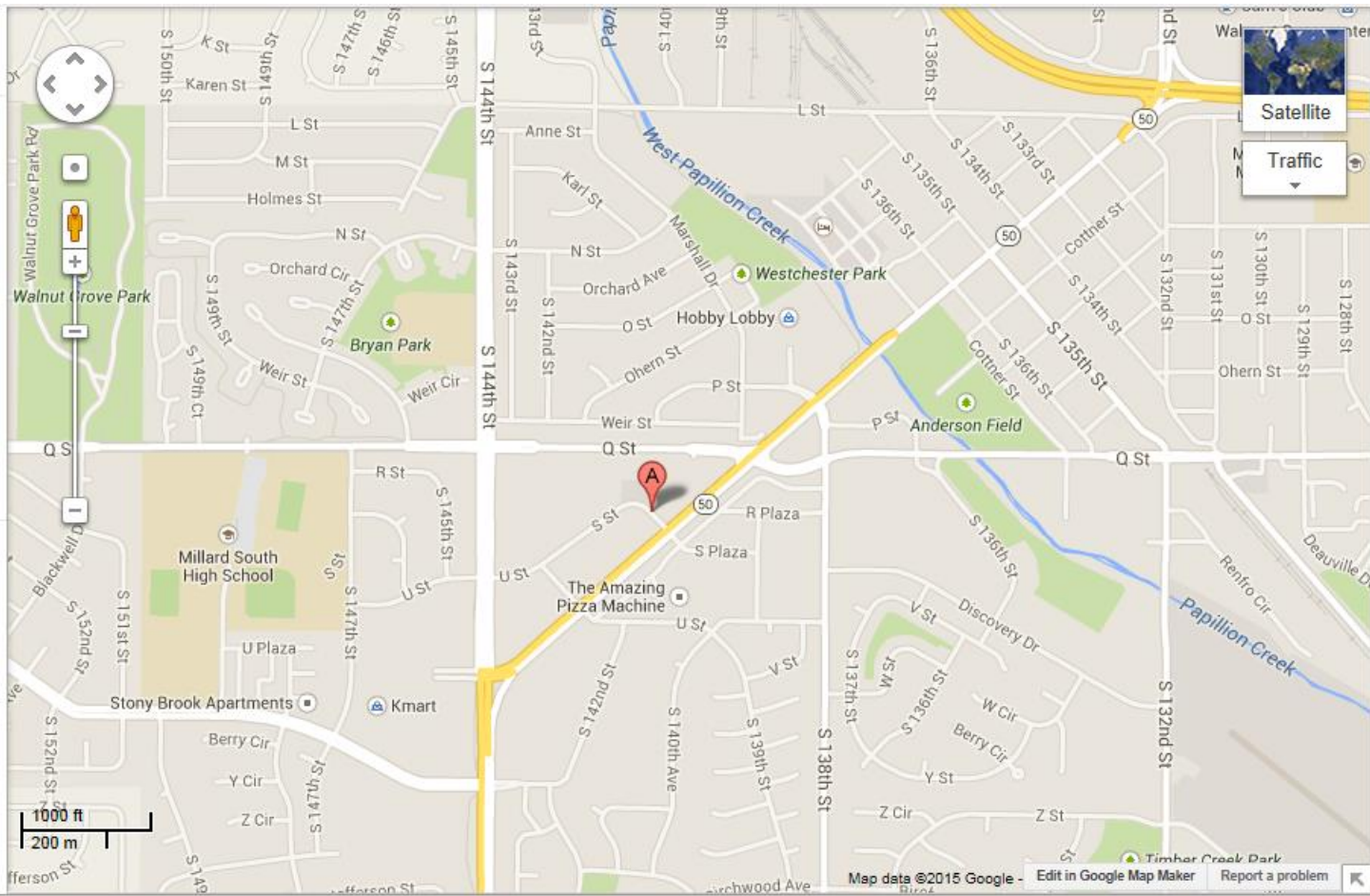
In case of Emergency, list name and phone number of person to call.

Name; _____

Phone: _____

List any physical restrictions below. If none, write "none".

Map and Directions



14121 S Street Omaha, Ne 68137

We are located just off Millard Ave, across the street from The Amazing Pizza Machine.

We are right next to the Arby's

