JUDO

Jiu Jitsu

For Self Defense & Sport

For Anyone, 10 yrs. & Older

Judo was introduced in 1882 as a sport utilizing the Jiu Jitsu style of fighting. Jiu Jitsu is the ancient martial art of Japan which uses strikes, wrist locks, arm bars, chokes, takedowns, throws, and grappling. Emphasis is placed on using an opponentôs size and strength against them. These are the techniques used by the Marine Corp. as well as law enforcement agencies around the world. Join the Northern Illinois Martial Arts Institute instructors at the Byron Park District to learn these techniques of self-defense and sport!! **Min. 4/Max. 20 Participants**

CODE:	**DAYS:**	**DATES:**	**TIME:**
230710-B4	Wednesdays & Fridays	1/25ð 3/16/12	7:00 - 8:00 p.m.
330710-C2	Wednesdays & Fridays	3/28ð 5/18/12*	7:00 - 8:00 p.m.
430710-D2	Wednesdays & Fridays	5/30ð 7/27/12 *	7:00 - 8:00 p.m.

* No Class 4/6, 7/4 & 7/13

FEES: $53/$58 ($10 discount for addt.ðl family members)

** uniform purchase of $50, payable to the NIMAI instructor, also required**

LOCATION: Mary Morgan Gym / Byron P.E. Center **INSTRUCTOR:** Wes Shuckhart

REGISTRATION DEADLINES: 1/16, 3/19, 5/21 **$5 discount if registered by these dates*

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Winter-Spring 2012 *$53/$58*

JUDO REGISTRATION FORM

Name: ________________________ **Birthdate:** ____________ **Phone:** ________________

Address:________________________________ **City, State, Zip:**________________________

Primary Guardian: ________________________ **E-Mail:** ____________________________

Emergencey Contact & Phone: ____

Circle Session: **230710-B4 1/25-3/16** **330710-C2 3/28-5/18** **430710-D2 5/30-7/27**

RELEASE OF LIABILITY STATEMENT

In consideration of me (or my child/ward) being allowed to enroll in this course(s), I hereby personally assume all risks in connection with this activity and I release the instructors, supervisors, owners and the Byron Park District for any injury or damage and further I save and hold harmless the instructors, supervisors, owners and the Byron Park District from any claim by me, my family, estate, heirs, or assigns, arising out of my enrollment and participation.

I have read and fully understand the above program details and waiver release of all claims.

Signature of Participant or Parent/Guardian ______________________________ Date ______________

BYRON PARK DISTRICT P.O. BOX 423 BYRON, IL 61010 815- 234-8435