



All United States Kendo Federation

Jun 10th, 2008

To: AUSKF Member Federation

Re: 2008 AUSKF Kendo Summer Camp Information, Application Form

Dear AUSKF Member Federation President:

As the date of the much anticipated 2008 AUSKF Kendo Summer Camp is fast approaching, I have decided to announce the details of the Summer Camp Information, Seminar Schedule and Application Form procedure. I hope that you will encourage your dojo members to begin making their plans to go to Santa Clara, CA, this coming August 2008.

This year, we have the privilege of welcoming two sensei of honor to this summer camp.

The 2008 AUSKF Kendo Summer Camp is an excellent opportunity for all kendoists in the United State to come together in one place and make friendships across the country.

Also I am enclosing the following detailed information regarding the 2008 AUSKF Kendo Summer Camp.

1. Information for the date, location, seminar fee, accommodation, dinner Party.
2. Application Form.
3. Seminar Schedule.
4. Kodansha Promotional Examination Information.
5. Kendo 5 Dan – 7 Dan Examination Application Form.
6. Shogo Examination Application form.

If you have any additional question, please feel free to contact me.

Tel: (248) 349-5377, Fax: (248) 349-9718, or E-mail: duke@twmi.rr.com

Address: 41444 Fawn Trail, Novi, Michigan 48375-4813

Sincerely,

Yoshiteru Tagawa
Vice President of Education

Education Committee:
Masaharu Makino
Shinobu Maeda
Yuji Onitsuka

2008 AUSKF Kendo Summer Camp

Seminar & Hotel Information

Date: August 29 (Friday Godo keiko)
Location: San Jose Buddhist Church
640 North 5th Street, San Jose, CA

Date: August 30 (Saturday), and 31 (Sunday)
Location: Buchser Jr. High School
1111 Bellomy Street Santa Clara, CA

Instructor: Two Sensei from Japan
Name is unknown

Seminar Fee: \$ 50.00

Lunch: August 30 (Saturday) and August 31 (Sunday)
\$10.00 per lunch each day

Dinner Party: August 30 (Saturday Night 7:00 PM)
Super Buffet Chinese Restaurant
3830 Stevens Creek Blvd
San Jose, CA 95112
Phone: (408) 985-2968
Cost: \$ 30.00

Hotel: Wyndham Hotels and Resorts
1350 N. First Street
San Jose, CA 95112-4789

Phone #: (408) 453-6200 call to make reservation. Your group code is **KENDO**

Wyndham Hotel has courtesy shuttle service to and from San Jose International Airport. Call (408) 453-6200 Courtesy Shuttle Service when you arrive at the airport. Wait at the courtesy shuttle service area.

Your room rate per night is \$99 + tax for maximum of 4 people per room.

- Each room will be either 2 double bed or 1 king bed with 1 queen pullout, or single king.
- Room type request will be granted on first come first serve base at time of making reservation.
- Each reservation must be booked and guaranty via major credit card or advance deposit.
- Any cancellation inside 48 hrs will penalize 100% of their total booking fee.

NOTE : to get these rates reservations must be made by July 29, 2008

2008 AUSKF Kendo Summer Camp Seminar Schedule

August 29, (Friday) 2008

5:00pm ~ 6:00pm Seminar Check-in
(At San Jose Buddhist Church)
640 N. 5th Street San Jose, CA
6:00pm ~ 7:30pm Godo-Keiko with Sensei from Japan

August 30, (Saturday) 2008

8:00am ~ 9:00am Seminar Check-in
(Santa Clara Buchser Jr. High School)
1111 Bellomy Street Santa Clara, CA
9:00am ~ 12:00pm Seminar
12:00pm ~ 1:00pm Lunch
1:00pm ~ 3:30pm Seminar
3:30pm ~ 4:00pm Q & A session
4:00pm ~ 5:00pm Keiko
7:00pm ~ 9:00pm Dinner Party

August 31, (Sunday) 2008

9:00am ~ 12:00pm Seminar
(Santa Clara Buchser Jr. High School)
1111 Bellomy Street Santa Clara, CA
12:00pm ~ 1:00pm Keiko
1:00pm ~ 2:00pm Lunch
2:00pm ~ 5:00pm Promotion Examination

* Time Schedule will be changeable on the day.

Direction for Hotel to San Jose Buddhist Church

San Jose Buddhist Church. 640 N. 5th Street San Jose, CA

1. Start out going NORTHWEST on N. 1st Street toward E. Gish Rd. 0.1 miles
2. Turn RIGHT onto E. Gish Rd. 0.1 miles
3. Turn RIGHT onto N. 4th Street. 1.0 miles
4. Turn LEFT onto E. Taylor Street. 0.1 miles
5. Turn RIGHT onto N. 5th Street. 0.1 miles

Direction for Hotel to Buchser Jr. High School

Buchser Jr. High School. 1111 Bellomy Street Santa Clara, CA

1. Start out going NORTHWEST on N. 1st Street toward Gish Rd. 0.1 miles
2. Make a U-TURN onto N. 1st Street. 0.2 miles
3. Merge onto I-880 South toward Santa Cruz. 2.1 miles
4. Take the BASCOM Ave. exit 0.1 miles
5. Keep RIGHT at the fork to go on N. BASCOM AVE. 0.1 miles
6. N. BASCOM AVE. become WASHINGTON Street. 0.4 miles
7. WASHINGTON Street become LAFATTE Street. 0.1 miles
8. Turn LEFT onto BELLOMY Street. 0.1 miles

Direction for Hotel to Super Buffet (Dinner)

Super Buffet Restaurant 3830 Stevens Creek Blvd. San Jose, CA

1. Start out going NORTHWEST on N. 1st Street toward Gish Rd. 0.1 miles
2. Make U-TURN onto N. 1st Street. 0.2 miles
3. Merge onto I-880 South toward Santa Cruz. 3.2 miles
4. Merge onto I-280 North toward San Francisco. 1.7 miles
5. Take the SARATOGA AVE. NORTH toward Santa Clara. 1.0 miles
6. Restaurant will be on back of Bank of West Bldg. RIGHT side of Saratoga Ave.

2008 AUSKF Kendo Summer Camp
August 29, 30 and 31, 2008
Application Form

AUSKF ID# : _____

Sex; M / F

Name: _____ Age: Rank:

Address:

Phone #: _____ E-mail:

Member Federation: _____ Dojo:

Seminar Fee,	\$ 50.00 per person:	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	\$
Lunch (8/30),	\$ 10.00 per person:	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	\$
Lunch (8/31),	\$ 10.00 per person:	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	\$
Dinner Party,	\$ 30.00 per person:	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	\$

Total amount of check: \$ _____

Non-Refundable

Please make check payable to: **All United States Kendo Federation**

(August 29th) Wyndham Hotel has Complimentary transportation to and from San Jose International Airport

(August 29th) Yes [] No [] Hotel to/from GYM and back to Hotel (Godo Keiko)

(August 30th) Yes [] No [] Hotel to/from GYM and back to Hotel

(August 30th) Yes [] No [] Hotel to Dinner

(August 31st) Yes [] No [] Hotel to /from GYM and back to Hotel

Application Deadline: **August 11th, 2008** No late application accept.

Mail to: Yoshiteru Tagawa
41444 Fawn Trail,
Novi, MI 48375-4813
Email: duke@twmi.rr.com

KODANSHA PROMOTIONAL EXAMINATION

At Santa Clara, CA

DATE

Sunday August 31st 2008

TIME

2:00 P.M. ~

LOCATION

**Santa Clara Buchser Jr. High School
1111 Bellomy Street,
Santa Clara, CA**

EXAMINATION RANK

5TH - 7TH DAN & SHOGO

APPLICATION DEADLINE

August 11th 2008

No late applications allowed

All applicants must submit:

1. Completed application form
2. Photocopy of existing Dan certification (Menjo)
3. Examination fee in the amount of \$50.00 payable to **All United States Kendo Federation**

MAIL TO:

**Arthur Murakami
4305 Mountain Shadows Dr.
Whittier CA 90601**

Kendo Examination

Applicants, upon passing the exam (kendo and kata), must submit their completed written test along with payment of Certificate Fee (English or Japanese). Payable to AUSKF

Shogo Examination

Applicants taking the Shogo Examination must take KATA Examination and submit the following along with their application:

Short essay (written in your own language) minimum of one full 8 ½ by 11 inch page.

Subject: "What Kendo means to you"

Minimum requirements for Shogo titles are as follows:

Renshi: 1 year after receiving 6th Dan

Kyoshi: 2 Years after receiving both 7th Dan and Renshi

If you have any question, please contact me by phone or fax at the number shown below.

Sincerely,

Ichiro Murakami

AUSKF VP Promotion

Phone (562) 692-4943

FAX (562) 463-3604

E-Mail ichiro_kendo@earthlink.net

Ichiro_kendo



All United States Kendo Federation

Date _____

Exam. Date _____

Requesting Rank _____
(Kyu/Dan/Shogo)

ID No. _____

Name _____
Last First Middle Regional Kendo Federation

Address _____
(Street)

(City) (State) (Zip)

Phone _____

E-Mail _____

Date of Birth _____

FAX _____

Present Rank _____

Date Received _____

Place of Practice _____

How many times a week _____

If requesting 5 Dan-7 Dan fill in I,II and III

1.	Attend Shinpan Seminar	II Attend Kata Seminar	III Shinpan Experience at Taikai
1.	_____ (Title) (Year)	_____ (Title) (Year)	_____ (Title) (Year)
2.	_____	_____	_____
3.	_____	_____	_____

List any handicaps, injuries etc: _____

(Signature of Applicant) (Date)

(Signature of Regional President) (Date)

**For fewer mistakes, please print clearly.
A Copy of your Menjo (Certificate) and \$50 Fee(Payable to All United States Kendo Federation must accompany this form.**



All United States Kendo Federation

Date _____

Exam. Date _____

Requesting Rank _____
(Kyu/Dan/Shogo)

ID No. _____

Name _____
Last First Middle Regional Kendo Federation

Address _____
(Street)

(City) (State) (Zip)

Phone _____

E-Mail _____

Date of Birth _____

FAX _____

Present Rank _____

Date Received _____

Place of Practice _____

How many times a week _____

If requesting Shogo fill in I,II and III

**I. Attend National
Camp/Seminar**

**II Attend Regional
Camp/Seminar**

**III Shinpan Experience
at Taikai**

1. _____
(Title) (Year)

_____ (Title) (Year)

_____ (Title) (Year)

2. _____

3. _____

List any handicaps, injuries etc: _____

(Signature of Applicant)

(Date)

(Signature of Regional President)

(Date)

For fewer mistakes, please print clearly.

A Copy of your Menjo (Certificate) and \$50 Fee(Payable to All United States Kendo Federation must accompany this form.