

# Aikido

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Instruction by Greg Noble, Sensei  
Godan Aikikai

August 9th , 2008

Hosted by Eishinkan Dojo  
Bayamon Municipal Gymnasium  
Carr. #2, Bayamon, Puerto Rico  
*Phone: 787.795.4067*



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## About the Seminar

Instruction and teaching methodology will be given by Greg Noble, Chief Instructor of Kushinkan dojo, WV. Standing and seated empty hand waza, as well as weapons training will be covered over the course of the event. Please bring your jo and bokken, weapons will be a large part of the seminar.

## Seminar Schedule

<b>Saturday</b> August 9th	9:30am 10:00am – 1:00 pm 3:00pm – 6:00 pm 7 pm	Registration Aikido Aikido Group dinner
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## About the Instructor

Greg Noble sensei started his martial arts path at age 15 years. He is currently ranked Godan Aikikai and holds dan ranking in Muso Jikiden Eishin-ryu Iai & Shindo Muso-ryu Jojutsu. Noble sensei is chairperson for the AWA Technical Committee and member of the AWA national testing committee. Dojo cho of Kushinkan dojo in WV, Noble sensei and his members are a founding member dojo of the Aikido World Alliance.

## Dojo Background and Bio

Eishinkan Dojo opened in August 2003 by Myriam Cedres sensei. Cedres sensei is a health professional who combines her medical & Aikido expertise into a holistic approach for her teaching. She is ranked sandan Aikikai and continues to make true O'Sensei's words that "Aikido is for the world".

## Lodging in the Area

**Wind Chime Inn**  
1750 McLeary Ave.  
Condado, San Juan  
Phone: 778.727.4153

**Comfort Inn San Juan**  
Clemenceau St. #6  
Condado, San Juan  
Phone: 787.721.0170

**El Canario By The Lagoon**  
Clemenceau St. #4  
Condado, San Juan  
Phone: 787.722.5056

## Upcoming AWA Events

September 12-14, 2008  
September 19-21, 2008  
October 9-12, 2008  
October 9-12, 2008

Roshinkan Dojo - Spokane, WA  
Memphis Aikikai - Memphis, TN  
AWA Yudansha Kai - Roswell, GA  
AWA Fall Camp - Roswell, GA

## Seminar Registration Form – Eishinkan Dojo, PR

I would like to register for the seminar. Please find enclosed my check or money order (made payable to “Aiki Dojo de Levittown”) in the amount of:

[ ] \$50 Entire Seminar

Event Date(s)	Fee	Today's Date
Name		
Mailing Address		
City	State	Zip
Home Phone	Work Phone	E-mail
Martial Art: Aikido [ ]		Other [ ]
Name of Dojo		Rank
Emergency Contact		Phone

### Payment Method

[ ] Check enclosed:                      Amount:  
 [ ] Cash

Please mail registration and payment to:  
 Aiki Dojo de Levittown Blvd. Monroig Y-26, Levittown Lalles Toa Baja, PR 00949

### For more information, contact:

E-mail: sensei.myriam@gmail.com  
 Ph: 787-795-4067  
 Ph: 787-795-5493

### Release of Liability (Please read before you sign)

For the permission of Aikido World Alliance, to use its facilities and of the execution by others of agreements similar, the undersigned agrees that while upon the premises of Aikido World Alliance or while using its facilities or equipment, whether at Aikido World Alliance or at any other location for the purpose of practice or of demonstration, said premises, facilities, and equipment shall be occupied and used at the sole risk and responsibility of the undersigned, and the undersigned hereby releases Aikido World Alliance from any and all claims for personal injury, damage, or loss of any kind or description resulting from being thereon or from such use or from the acts of any persons thereon. The undersigned further agrees to indemnify and hold harmless Aikido World Alliance and each of its instructors, teachers, officers, directors, and members from or against any and all claims made or instituted against it or them arising out of the acts of the undersigned while upon the premises of Aikido World Alliance or while using any of its facilities or equipment, whether at the Aikido World Alliance or any other location for the purpose of practice or demonstration, including injury or loss to the undersigned however caused and injury or loss caused by the undersigned to any other person. I certify by my signature that I have read and understand this agreement in its entirety and all of my questions regarding it have been fully answered. I understand that Aikido World Alliance document activities and events involving classes and instruction. I give Aikido World Alliance permission to use any documentation, such as video taping, photography, or film, in which my image is taken in whatever way Aikido World Alliance wish. I understand that Aikido World Alliance is the sole owner of this documentation.

**Signed:**

**Signed:**

(Parent or guardian if participant is under 18)

Date:	By Whom:		
Amount:	Cash:	Ck:	Chg:
Note:			