



# United States Martial Arts Hall of Fame

Date Received: _____	Payment: _____
<input type="checkbox"/> Master List	<input type="checkbox"/> Distribution List
<input type="checkbox"/> Awards Packet	<input type="checkbox"/> Banquet Tickets
<input type="checkbox"/> Attend Camp Y N	<input type="checkbox"/> Pre-Order Items
<input type="checkbox"/> HOF Ring Y N	<input type="checkbox"/> Testing Candidate
<input type="checkbox"/> Int'l Rank Registry	<input type="checkbox"/> Post Mail

## 2024 Nomination Acceptance Form

Please complete this form and return it with a photo, a short biography, and your check (or credit card info) to:

Professor John L. Terry, III, President  
**United States Martial Arts Hall of Fame**  
 314 Quail Creek Road  
 Hot Springs AR 71901

YES, I accept induction into the United States Martial Arts Hall of Fame. My information is provided below:

Full Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ How Long in the Martial Arts: \_\_\_\_\_ Style: \_\_\_\_\_

Highest Rank: \_\_\_\_\_ Instructor: \_\_\_\_\_ Date Highest Rank Received: \_\_\_\_\_

Other Styles Studied/Rank: \_\_\_\_\_

Association Memberships: \_\_\_\_\_

Awards Received: \_\_\_\_\_

Are you an active Martial Arts Instructor:  Yes  No If Yes, What Style(s)? \_\_\_\_\_

School Name: \_\_\_\_\_ School website: \_\_\_\_\_

Date of Acceptance: \_\_\_\_\_ Signature: \_\_\_\_\_

Induction Fee \$325.00  Yes, I will attend the banquet  No, I will be unable to attend.

*Award Packet consists of prestigious 9" x 12" Personalized, Laser-Etched United States Martial Arts Hall of Fame Awards Plaque, United States Martial Arts Hall of Fame Fraternity Membership Certificate, International Martial Arts Council of America Membership Certificate, United States Martial Hall of Fame Inductee Patch, International Martial Arts Council of America Membership Patch, One-Year Online Access to the IMAC Leadership Academy, and one banquet ticket to our black-tie event. (Retail Value: \$1,070.00)*

**Specify Shirt Size (Circle One)**

S M L XL 2XL 3XL

*If you are unable to attend, our processing center will ship your award packet at the conclusion of our Hall of Fame event. The cost of your banquet ticket will be applied to applicable shipping & handling charges.*

Banquet Guests (\$75 Each) # Guests: \_\_\_\_\_ \$ \_\_\_\_\_

United States Martial Arts Fraternity Ring (or Pendant)

*Complete the order form on the reverse side of this Acceptance Form*

**You will pay Balfour separately for your USMAHOF Fraternity Ring or Pendant**

### Optional Items

IMAC National Training Camp Fee WAIVED

*As an inductee, you are eligible to attend our 2-1/2 day National Training Camp (a \$150 retail value)*

IMAC International Rank Recognition \$100.00

*Register your current black belt rank with IMAC's International Rank Registry.*

*Include a copy of your current black belt rank certificate. (Retail Value: \$150.00)*

Hall of Fame T-Shirt \$ 30.00

Specify T-Shirt Size (Circle One)

S M L XL 2XL 3XL

IMAC Association T-Shirt \$ 30.00

Specify T-Shirt Size (Circle One)

S M L XL 2XL 3XL

Camp T-Shirt \$ 30.00

Specify T-Shirt Size (Circle One)

S M L XL 2XL 3XL

Three T-Shirt Combo Package (Same Size, All Three T-Shirts) \$ 85.00

Specify T-Shirt Size (Circle One)

S M L XL 2XL 3XL

**Total: \$ \_\_\_\_\_**

### Check One:

My check is enclosed. *Make check payable to "United States Martial Arts Hall of Fame"*

Please send me a Paypal Invoice.

Please charge my VISA/Mastercard/Discover/AMEX.

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ CSV: \_\_\_\_\_ (3 or 4 digit code)

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Billing Address for Credit Card: \_\_\_\_\_

**HOTEL RESERVATIONS:** Group discount is available through June 15, 2024. You must use the link on our website or contact the hotel as soon as possible to reserve your room at the discounted rate. If you are contacting the hotel directly, call 800-675-3267 for our discounted room rate. Reservation ID: **IMAG24P**

[www.UnitedStatesMartialArtsHallofFame.com](http://www.UnitedStatesMartialArtsHallofFame.com)

United States Martial Arts Hall of Fame • 314 Quail Creek Road • Hot Springs AR 71901 • P 479-970-2079



# United States Martial Arts Hall of Fame

## NATIONAL TRAINING CAMP Waiver and Release Form

### Waiver

I, the below-signed individual, voluntarily submit my application for training with the International Martial Arts Council of America (IMAC) and hereby declare that, to the best of my knowledge and ability, the information on this application is true and factual.

### Section I.

I, the undersigned, request the privilege of admission to the course organized by The International Martial Arts Council of America, Inc. (IMAC) and the United States Martial Arts Hall of Fame (USMAHOF) and given at the above-mentioned place and time. I understand that the classes taught in this seminar are martial arts-oriented involving strenuous exercise and physical contact. I understand that martial arts and related defensive tactics are inherently dangerous and I could face severe injury or death from participation in this event. I further understand that neither IMAC, USMAHOF, nor the organizers of this seminar offer any insurance or guarantees of any sort, nor subscribe to any insurance against illness or injuries to the course participants or damage to their property. In consideration of the privilege of being admitted to participate in the course, of receiving the provided instruction, and of using the host organization's installations for the duration of the seminar and/or banquet activities, I hereby declare that I will personally assume all responsibility concerning any illness or injury that I may incur or that may be inflicted on me by others during the course, be it on or off the premises, before, after, during or between sessions or at the banquet. I hereby hold immune and release IMAC, USMAHOF, John Terry, its directors, employees, agents, and representatives, and The Orleans Hotel & Casino (Las Vegas) from all responsibility, accountability, and any reparations concerning personal injuries, lawsuits, damages, losses of any nature whatsoever, in law and equity, relative to the activities mentioned above. I hereby agree and engage, in the name of my heirs and beneficiaries, never to pursue, legally or in equity IMAC, USMAHOF, John Terry, employees, agents or representatives, or The Orleans Hotel & Casino (Las Vegas) in relation to such illnesses, injuries, lawsuits, damages, responsibilities, accountabilities, reparations or losses. Your signature below also shall act as an image release allowing photos or videos taken to be used In promotional material.

Initial \_\_\_\_\_

TO ATTEST TO THIS, I have signed this document and declare that I have read it and understand it.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

(If participant is under 18 years of age)



# United States Martial Arts Hall of Fame

## 2024 Fraternity Ring Order Form Championship Ring Order

Order Date: ____ / ____ / ____		Sales Office: Steve Andrien / Bruce Rock	
School / Organization Name: United States Martial Arts Hall of Fame			
First Name: _____		Last Name: _____	
E-Mail: _____			
<b>Ship To:</b>		<b>Bill To:</b>	
Name: _____		Name: _____	
Address: _____		Address: _____	
City, State, Zip: _____		City, State, Zip: _____	
ATTN: _____		ATTN: _____	
Ring Top: United States Martial Arts Hall of Fame		[ X ] Black Onyx (Facet Cut)	
Ring Size: _____ <small>Recommendation is ½ size larger than standard ring size due to ring width</small>		Metal: [ X ] Celestrium	
Engraving: _____ <small>Maximum of 20 Spaces</small>			
Shank Information:		Side One: _____ <small>Year of Induction</small>	Side Two: Inductee
<b>Pricing</b>			
	\$350.00	[ ] Men's Fraternity Ring	
	\$450.00	[ ] Men's Fraternity Ring (CZ Stone Insert – 5 <sup>th</sup> Dan or Higher)	
	\$275.00	[ ] Women's Fraternity Ring	
	\$245.00	[ ] Women's Fraternity Pendant	
<b>Payment Information</b>			
Card # _____		[ ] Check [ ] Money Order <b>Payable to: "Balfour Company"</b>	
Expiration Date: ____ / ____ <small>Month / Year</small>		[ ] VISA [ ] MC [ ] Discover [ ] AMEX	
Signature: _____		Date Signed: ____ / ____ / ____	
Name: _____		<small>(Exactly as it appears on the credit card)</small>	
Billing Address: _____ <small>(Where your credit card statement is mailed)</small>			
City: _____		State: _____ Zip: _____	
Day Phone: _____		Evening Phone: _____	

**NOTE: USMAHOF Fraternity Rings are individually crafted by Balfour Company. Please allow 8-12 weeks for delivery.**

*\* The privilege of ordering and wearing the USMAHOF Fraternity Ring is exclusively that of Inductees or Staff of the United States Martial Arts Hall of Fame who are in good standing with the organization. The United States Martial Arts Hall of Fame reserves the exclusive right to determine the eligibility requirements, to refuse service to anyone or to revoke the order of any individual who, in the sole opinion of the organization, does not meet the organization's eligibility requirements.*