

The 36th (almost annual)

IWAMA-STYLE AIKIDO GASSHUKU*

TAA MEMORIAL DAY WEEKEND WORKSHOP

Learn from these Great Instructors:

合
氣
道

HANS GOTO Shihan - 7th Dan
Hoa Newens Shihan - 7th Dan
Kim Peuser Shihan - 7th Dan
Bernice Tom Shihan - 7th Dan
Wolfgang Baumgartner Shihan - 7th dan
Deborah Maizels Sensei – 6th Dan
Aviv Goldsmith Sensei - 6th dan
Douglas Dale Sensei - 6th dan
Ginny Breeland Sensei - 6th dan
Sandro Lucagnano Sensei - 5th dan
and guest instructors
Geoff Evans Sensei – 6th dan
Nathan Feileacan Sensei - 5th dan



Friday - Sunday, May 22 – 24, 2026

\$179 discounted early registration through April 24

\$159 for Teens and White Belts

\$219 thereafter for all (space available)

Friday 5 PM – Sunday 2 PM

Incline Village, Nevada

Location:

[Incline Village Recreation Center](#)
980 Incline Way
Incline Village, NV 89451

For more information, look at www.gashuku.net,
email to aviv@aikidoinn.com or
call Aviv Sensei at 1.540.455.3378

Beautiful Lake Tahoe

Bring bokken, jo, and good kimochi.

AIKIDO GASSHUKU

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In 1988, Wolfgang Baumgartner Sensei hosted the senior Iwama-style Aikido instructors in the U.S. for a seminar at the RideOut School in Tahoe City (see photo) with Senseis Bill Witt, Dennis Tatoian (r.i.p.), and Hans Goto. This seminar has been expanded over the years and has now become the [TAA](#) (almost annual) Iwama-Style Memorial Day Weekend Aikido Gasshuku.



TENTATIVE WORKSHOP SCHEDULE:

Friday	Saturday	Sunday
5 - 7PM Keiko	9A – Noon Keiko and Dan Demos	9AM – 1:30 PM Taijutsu and Bukiwaza
	Lunch (on your own)	
	2P – 5P Keiko	
	TAA Dojo Cho Meeting	
	TAA Dojo Cho Reception (tentative)	



**A Gasshuku is an opportunity to intensively train together -- to meditate, eat, drink, practice Aikido, and sleep -- all in the spirit of Budo.*

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TAA MEMORIAL DAY WEEKEND WORKSHOP

Registration Form - Non-refundable Fee (payable to Aikido) **Must Accompany Registration**
(please mail Completed form and payment to Aikido, 6155 Hickory Ridge Road, Spotsylvania, VA 22551, or [register online](#).
After April 24 contact aviv@aikidoinn.com first to be sure that space is still available).

Name _____

Contact Telephone _____

Address _____

City, State _____

Zip _____

Aikido Rank _____

Home Dojo _____

Email Address _____

PLEASE SUBMIT ONE SIGNED WAIVER FORM FOR EACH SEMINAR PARTICIPANT

READ THE FOLLOWING CAREFULLY - IT LIMITS OUR LIABILITY

I, the undersigned guest of the TAKEMUSU AIKIDO ASSOCIATION, AIKIDO IN FREDERICKSBURG, and the INCLINE VILLAGE GENERAL IMPROVEMENT DISTRICT (hereafter called "Schools"), acknowledge that I am applying for instruction in a martial art involving strenuous exercise and personal body contact. I acknowledge that any insurance that the Schools may carry may not cover injury or illness. I do hereby hold the Schools, their instructors, employees, volunteers, contractors, and agents harmless from any and all liability (including attorney's fees and costs) for all claims, actions, or damages due to injuries or illness suffered by me or caused to third parties by me, arising out of activities involving Aikido, or any variation thereof, whether occurring on the premises of the Schools or elsewhere, excepting only those claims, actions, or damages caused by their gross negligence or willful misconduct.

I agree to abide by the rules of the Schools and to follow explicitly all instructions given by instructors. I understand that (a) training is a privilege, (b) the Schools may refuse to provide instruction or membership to any person at any time, (c) fees paid are not refundable, and (d) there is a risk of infection of respiratory infections such as covid-19 anywhere people gather in closer proximity. I agree to receive communications at the above addresses from the Schools and I agree that the Schools may use any photos or images of me taken at the seminar. I agree (1) not to bring or consume any alcoholic beverages or to have any open flames on Schools' property, (2) not to take any video images of the seminar, (3) to clean up any trash generated during the weekend, and (4) not to attend if I have a respiratory infection or other communicable illness.

Date _____ Signature _____

If student is under eighteen (18) years of age, parent or guardian must sign here.

I, the undersigned, as parent or guardian of the above applicant, certify that I have read the above application and I consent to the applicant's receiving the instruction applied for and I agree to the provisions of the contract for myself and said applicant.

Date _____ Signature _____

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**Early Registration Form – Discounted Non-Refundable Fee (payable to Aikido)
Must Accompany Registration – Before April 24**

I am signing up for ____ (# of yudansha) for the weekend @ \$179 each = \$ _____

Names of other adults yudansha (s) being registered for seminar

I am signing up for ____ (# of white belts or teens) for the weekend @ \$159 each = \$ _____

Names of other white belts or teens (s) being registered for seminar

Total amount included = \$ _____

