



# TOKEY HILL MARTIAL ARTS & WARREN LEVI KARATE SAMURAI CUP DOJO INVITATIONAL

Sunday, June 6, 2010

**PLEASE REGISTER BY Monday, May 24, 2010**

## COMPETITION FEE: \$35 (2 Family Members \$65)

Please make check payable to \*\*\*\*\* and bring *with* application

CHECK THE CATEGORY (IES) YOU WILL BE COMPETING IN:  KATA (FORMS)  KUMITE (SPARRING)

NAME: \_\_\_\_\_ HOME TELEPHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

BELT LEVEL: \_\_\_\_\_ YEARS TRAINING: \_\_\_\_\_  MALE  FEMALE

CHECK  CASH  CREDIT CARD

CREDIT CARD #: \_\_\_\_\_ EXP: \_\_\_\_/\_\_\_\_ SECURITY CODE: \_\_\_\_\_

### ***PLEASE READ CAREFULLY BEFORE SIGNING***

1. I, the undersigned, do hereby voluntarily submit this application for attendance and participation in the Samurai Cup Dojo Invitational on June 6, 2010, and hereby assume full responsibility for all injuries, damage, or losses, including death, that I may sustain or incur, while attending or participating, and I hereby waive all claims of any nature, including any negligent act or omission, against Warren Levi Karate & Tokey Hill Martial Arts, their instructors, officers, members, and employees, individually or otherwise, for any claim for injuries I may sustain.
2. I fully understand that any medical treatment given to me will be of first aid type only.
3. I consent that any picture taken of me in connection with the tournament can be used for publicity, promotion, or television showing, in the present or future, and waive any compensation in regard thereto.
4. I understand that Warren Levi Karate & Tokey Hill Martial Arts, reserves the right to combine or cancel any division, or place any individual competitor in a different division in accordance with their size, age, or experience level.
5. If under 18 years of age, this release must be signed by a parent or guardian.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE