USA KARATE CHAMPIONSHIPS

Saturday, April 17, 2010
Clarks Summit Elementary School
Clarks Summit, Pennsylvania

OFFICIAL ENTRY FORM

NAME: _____ AGE: _____ SEX: >M >F

ADDRESS (HOME): _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

YOUR RANK (BELT): _____ PHONE: _____

SCHOOL NAME: _____ PHONE: _____

SCHOOL ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

INSTRUCTOR'S NAME: _____ RANK: _____

EVENT (please circle): TRADITIONAL FORMS OPEN FORMS BREAKING WEAPONS
SPARRING JUMP FRONT KICK JUMP SIDE KICK

LIABILITY WAIVER

I hereby submit my application for registration in the 11th USA KARATE CHAMPIONSHIPS. I agree to waive claims against any persons connected with the Championship for injuries I may sustain and likewise assume full responsibility for all my actions in connection with said Championship. I understand that any pictures of me participating in the Championship may be used for publicity without compensation.

Signature: _____ DATE: _____
If under 18 years of age Parent/Guardian's Signature

_____ DATE: _____

Before March 20th
Pre-Registration: $45 1st event and $5 each additional event TOTAL: $ _____

Return this form with your check or money order to:
Master Eric Kovaleski Postmarked by March 20, 2009
802 Main St. Dickson City, PA 18519
570-307-KICK – 570-489-1163 (FAX)

NO REFUNDS