

DURO Ý SUAVE, MANOS VACIAS BROTHERHOOD MARTIAL ARTS CHAMPIONSHIP

TOURNAMENT UBBS RATED: 5****STARS/AAA PLATINUM

TOURNAMENT REGISTRATION FORM

TOURNAMENT DATE: Saturday August 4th, 2018 LOCATION: South Orlando YMCA, 814 W. Oak Ridge Road, Orlando, Florida 32809. For more Information, please contact (863)588-5928, web site www.citykarate.com or email: citykarate@hotmail.com

Registration Instructions: Please complete registration form in its entirety, circle the division & age category you are competing in, total payment below, and mail form and payment to: South Orlando YMCA, 814 W. Oakridge Road, Orlando, Florida 32809, ATTN: FRANKIE HUERTAS. <u>MONEY ORDER PAYABLE TO SOUTH ORLANDO YMCA</u>

The age a competitor is, as of January 30th, is their competition age for the year. Competitors must have a proof of age document in case it is requested.

<u>DIVISIONS</u>: NOV: White, Yellow, Orange INT: Blue, Green, Purple or Equivalent / ADV: Brown, Red, Black or Equivalent / Categories according to age, rank & gender: 4-5 / 6-7 / 8-9 / 10-11 / 12-13 / 14-15 / 16-17 / 18-29 / 30-39 / 40-49 / 50+ BLACK BELT CATEGORIES: 18-29 / 30-39 / 40 -49 / 50-64 / 65+.

Name		DOB	Age	MF	Weight
Address		City		State	Zip
Phone ()	Email:_				
Belt Rank		_ Rookie League	Nov Int	Adv B	В
Instructor School/Dojo Phone:					
School/Dojo Address:					

Please Check Mark in what Events you will be competing: KATA (Traditional Forms ______ KOBUDO (Traditional Weapons Forms) _____ KUMITE (5 Point Sparring) _____

More Events will be added like Chinese Forms, Korean Forms, American Kenpo Forms, etc. If there is quorum of competitors). *** (Male and Female compete separately in all Forms (Kata) and Sparring (Kumite) Categories). Note: Traditional Weapons only (Bo, Sai, Kama, Tonfa, Nu Chucks, Traditional Sword). Safety Equipment Required (Hand, Foot, Groin Protection, Headgear, Mouth Piece – Chest Gear Optional)

Competitor Registration Fee:

1-2 events \$50.00		
Plus \$5.00 per eacl	n additional event = \$	
Coach's Pass	x \$10.00 = \$	
Spectator Fee	x \$10.00 Adult/Children \$5.00 = \$	

*** Pre-Registration Fee if paid by or before July 4TH, 2018: 1-2 Events = \$40.00 (\$5.00 Each additional Event)

Grand Total Enclosed = \$____

(In Tournament Spectators Fee Children 5 yrs. old & under enter free)

Waiver:

By signing this form, I understand that the YMCA of Central Florida and associates assumes no responsibility for injuries or illness which I may sustain as a result of my physical condition or from any participation in the event or other activities. I expressly acknowledge on behalf of myself and my heirs that I assume the risk of any and all injuries and illness, which may result from my participation in these activities. I hereby release the Central Florida YMCA and associates, its agents, servants and employees from any and all claims for injury, illness, death, loss or damage, which I may suffer as a result of my participation in these activities.

I understand that the YMCA of Central Florida parties mentioned above are not responsible for personal property lost or stolen while members and/or program participants are on the premises. I give my permission to the Central Florida to use, without limitation or obligation, photographs, film footage, or tape recording, which might include my image or voice for purpose of interpreting YMCA program.

Acceptance: I acknowledge the waiver set forth above, and being in sympathy with the mission statement of the YMCA, agree to sign the waiver.

Competitor's Signature: ____

(if under 18, parent or legal guardian must sign for competitor).