

2012 SKI-USF National Championship
Kata and Kumite Registration Form

Name: _____ Age: _____ DOB: _____ Sex: _____ Weight: _____
lbs.

Mailing Address: _____

Street City State Zip
Phone: _____ Email: _____ Rank: _____

Dojo: _____ Sensei: _____ Length of Training: _____ yrs _____ months

I, THE UNDERSIGNED, STATE:

I have been advised that my participation in the 2012 SKI-USF National Championship Tournament, March 25, 2012, held at the "Columbia Neighborhood Center", will expose me to a risk of serious personal injury including permanent disability and death. I am aware of this potential danger, and with full knowledge of this risk, voluntarily accept and assume the risk of injury by signing this RELEASE and by participating in these activities. Further, and in exchange for my participation in the 2012 SKI-USF National Championship Tournament, I, on behalf of myself and my successors, assigns, and heirs, release SKI-USF, the Satsuma Dojo, Columbia Neighborhood Center, City of Sunnyvale, City of Sunnyvale Recreation Department, and any of its sponsors, donors, owners, directors, and officers, agents, employees, members, volunteers, and representatives from any and all liability from injury, damage or loss to person, persons, or property based upon their negligence in connection with my participation in this competition. I further agree to indemnify and to hold harmless SKI-USF, the Satsuma Dojo, Columbia Neighborhood Center, City of Sunnyvale, City of Sunnyvale Recreation Department, and any of its sponsors, donors, owners, directors and officers, agents, employees, members, volunteers and representatives from any and all claims made against them arising from participation in this competition. I fully understand that any medical treatment given will be of a first aid treatment type only. I consent that any pictures taken of me in connection with the competition can be used for publicity, promotion or television shown now or in the future, and I waive compensation in regard thereto. All participants in any event or class in this competition is by permission only. The Director or authorized agents reserve the right to refuse entry to any person, school, team or club.

I have read this CONSENT and RELEASE, understand the meaning of its content, and sign it voluntarily.

Please print your full name Signature of Competitor Date

For the MINOR Student:

I am the parent or legal guardian of the above competitor and have read the above CONSENT to my child's participation in the 2012 SKI-USF National Championship Tournament, under the terms and conditions above. With my signature, I hereby release the 2012 SKI-USF National Championship Tournament of any and all liabilities.

Please print your full name Signature of Parent or Guardian Date

Individual Divisions:

Kata: _____ Kumite: _____

(For Kumite events: Mouthpiece, gloves and groin cup (males) are mandatory. Headgear and chest protectors (for females only) are optional. No shin pads or instep guards allowed.)

Tournament Fees:

	<u>1 Event:</u>	<u>2 Events:</u>
Adult	\$50	\$60
Youth (19 and under)	\$25	\$30

(All fees are non-refundable. Please make check or money orders payable to: **Satsuma Dojo**)

Sensei's Signature: _____

(Participants, since this tournament is for SKI-USF members only, please obtain your instructor's authorization to participate in the SKI-USF National Championship. Registration will not be processed without signature)

This event is PRE-REGISTRATION ONLY. Please postmark your completed registration forms and payment no later than March 12, 2012. NO registration will be accepted at the door.

Please mail to:

Satsuma Dojo
c/o Peter Rodriquez
38710 Adcock Drive

Fremont, CA 94536

