

Name _____
 Street Address _____
 City _____
 State _____ Zip Code _____
 Phone Number _____
 Email _____ Age _____
 Gender _____ Belt Color _____
 Which studio do you attend _____
 Instructor _____

Please check the events you will be doing.

Musical Forms	<input type="checkbox"/>
Weapon Forms	<input type="checkbox"/>
Team Forms	<input type="checkbox"/>
Mega Team Forms	<input type="checkbox"/>
Open Forms	<input type="checkbox"/>
Sparring	<input type="checkbox"/>

EVENT REGISTRATION FEES

First Event		\$60	=	<u>\$60</u>
Each Additional Event	<u> </u> X	\$25	=	<u> </u>
Number of Spectators	<u> </u> X	\$7	=	<u> </u>
Total amount			=	<u> </u>

GRAND TOTAL

I, the undersigned, do hereby apply for application in the Best of the Best Karate Tournament. I do hereby assume any and all responsibility for any and all losses, damages, and or injuries I may sustain or incur, if any, while attending and participating. I hereby waive any and all claims against Elite Karate Studios, LLC., the school hosting the event, EMT's & paramedics, officials, hosts, promoters, operators, sponsors and fellow participants of this tournament, individually or jointly for any losses, damages or injuries. I also agree that any and all photographs or video taken by the officials of the tournament are the sole property of the tournament officials.

Student Signature _____

Date _____

Guardian's Signature _____

Date _____