

11th DOKIJU Karaté Stéphane Marcotte Championship – May 18, 2019 - Event Application



First Name: _____

Name: _____

Date of birth (D/M/Y): _____

Age : _____ Sex: M _____ F _____

Weight: _____ Lbs Height : _____ (metres)

Belt grade : _____ Rang Kyu : _____

Address : _____
Number Street City Postal code Country

Dojo: _____

Style : _____

Name of the director of the Dojo: _____

Dojo's email: _____

Dojo's phone number: _____

CATEGORIES :

KATA

WEAPON KATA

SEMI-KNOCKDOWN FIGHTING

TOURNAMENT FEES (cash only) :

\$45CAD (one category) \$10CAD (for each additional category)

TOTAL : _____ Paid :

I, the undersigned, to hereby voluntarily submit my application for participation as a competitor in 11th Karaté Stéphane Marcotte DOKIJU Championship and I undertake to comply with the regulations in effect at this event. I also assume full responsibility for any and all damages, injuries or losses that I may sustain or incur while attending or participating in the aforementioned event. I waive any legal action or claim against the organizers, instructors, judges, referees, volunteers, agents or promoters of this tournament. I agree that the photographs and / or videos representing me in the context of the competition may be used for advertising or promoting the *Karate Stéphane Marcotte* and, if applicable, I waive any monetary compensation. I understand that the money disbursed (or to be disbursed) in connection with this competition is not refundable (except in the case of the cancellation of the tournament). Finally, I fully understand that any medical treatment provided to me as a response to injury will be of the first aid type only. I have read this document, I understand its meaning and I agree to sign this form of liability waiver to participate in this organized karate competition by *Karaté Stéphane Marcotte*.

Applicant Signature : _____

Parent or Guardian (If under 18 years of age)

KATA

First Name : _____

Name : _____

Age : _____

Belt : _____

Dojo : _____

WEAPON KATA

First Name : _____

Name : _____

Age : _____

Belt : _____

Dojo : _____

FIGHTS

First Name : _____

Name : _____

Age : _____

Weight : _____ lbs

Belt : _____

Dojo : _____