



Where Olympic Journeys Begin

USA National Karate-do Federation National Championships & Team Trials **TEAM KATA** Registration Form

TEAM NAME: _____

PRICE: \$175 per Non-elite team, \$250 per Elite team ****All athletes must meet the age requirements.**

CATEGORY: Team Kata (3 athletes maximum)

- | | |
|---|---|
| <input type="checkbox"/> TK300 9 & Under Beg/Nov Female Team Kata | <input type="checkbox"/> TK310 9 & Under Beg/Nov Male Team Kata |
| <input type="checkbox"/> TK301 9 & Under Int/Adv Female Team Kata | <input type="checkbox"/> TK311 9 & Under Int/Adv Male Team Kata |
| <input type="checkbox"/> TK302 10-13 Beg/Nov Female Team Kata | <input type="checkbox"/> TK312 10-13 Beg/Nov Male Team Kata |
| <input type="checkbox"/> TK303 10-13 Int/Adv Female Team Kata | <input type="checkbox"/> TK313 10-13 Int/Adv Male Team Kata |
| <input type="checkbox"/> TK304 14-17 Beg/Nov Female Team Kata | <input type="checkbox"/> TK314 14-17 Beg/Nov Male Team Kata |
| <input type="checkbox"/> TK305 14-17 Int/Adv Female Team Kata | <input type="checkbox"/> TK315 14-17 Int/Adv Male Team Kata |
| <input type="checkbox"/> TK306 18-34 Beg/Nov Female Team Kata | <input type="checkbox"/> TK316 18-34 Beg/Nov Male Team Kata |
| <input type="checkbox"/> TK307 18-34 Int/Adv Female Team Kata | <input type="checkbox"/> TK317 18-34 Int/Adv Male Team Kata |
| <input type="checkbox"/> TK308 35+ Beg/Nov Female Team Kata | <input type="checkbox"/> TK318 35+ Beg/Nov Male Team Kata |
| <input type="checkbox"/> TK309 35+ Int/Adv Female Team Kata | <input type="checkbox"/> TK319 35+ Int/Adv Male Team Kata |

CATEGORY: Mixed Gender Team Kata *Team may be made up of males and/or females. (3 athletes maximum)*

- | | |
|--|--|
| <input type="checkbox"/> TK320 9 & Under Beg/Nov Mixed Team Kata | <input type="checkbox"/> TK326 18-34 Beg/Nov Mixed Team Kata |
| <input type="checkbox"/> TK321 9 & Under Int/Adv Mixed Team Kata | <input type="checkbox"/> TK327 18-34 Int/Adv Mixed Team Kata |
| <input type="checkbox"/> TK322 10-13 Beg/Nov Mixed Team Kata | <input type="checkbox"/> TK328 35+ Beg/Nov Mixed Team Kata |
| <input type="checkbox"/> TK323 10-13 Int/Adv Mixed Team Kata | <input type="checkbox"/> TK329 35+ Int/Adv Mixed Team Kata |
| <input type="checkbox"/> TK324 14-17 Beg/Nov Mixed Team Kata | <input type="checkbox"/> PK340 Para Beg/Nov Mixed Team Kata |
| <input type="checkbox"/> TK325 14-17 Int/Adv Mixed Team Kata | <input type="checkbox"/> PK341 Para Int/Adv Mixed Team Kata |

CATEGORY: Family Team Kata

- | | |
|---|---|
| <input type="checkbox"/> TK330 Beg/Nov Family Team Kata | <input type="checkbox"/> TK331 Int/Adv Family Team Kata |
|---|---|

CATEGORY: Elite Team Kata

- | | |
|--|--|
| <input type="checkbox"/> ETK500 14-17 Elite Male Team Kata | <input type="checkbox"/> ETK503 18-20 Elite Female Team Kata |
| <input type="checkbox"/> ETK501 14-17 Elite Female Team Kata | <input type="checkbox"/> ETK600 18-34 Elite Male Team Kata |
| <input type="checkbox"/> ETK502 18-20 Elite Male Team Kata | <input type="checkbox"/> ETK601 18-34 Elite Female Team Kata |

NAME (please print)	USA KARATE MEMBERSHIP NO.	AGE
1		
2		
3		
4		
5		



Where Olympic Journeys Begin

USA National Karate-do Federation National Championships & Team Trials **TEAM KATA** Registration Form

CLUB/DOJO NAME: _____

INSTRUCTOR/SENSEI'S NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Sensei's Signature

Date

Adult & Minor Amateur Athletic Waiver and Release of Liability

In consideration of being allowed to participate in any way in the USA National Karate-do Federation (USA Karate) competition and related events and activities, the undersigned:

1. Agrees that prior to participating, they know and understand the Rules of Competition, and that they (if under 18 years of age a Parent or Guardian) will inspect the facilities and equipment to be used, and if the participant and/or Parent or Guardian, believes anything is, or may be, unsafe, they will immediately advise their coach or supervisor and the event personnel of such condition(s) and refuse to participate unless and until such condition is remedied.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at the time. The undersigned assumes all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
3. Release, waive, discharge and covenant not to sue USA National Karate-do Federation, USA Karate, The United States Olympic and Paralympic Committee, , Visit Fort Worth, Fort Worth Convention Center, Fort Worth Sports Commission, City of Fort Worth, Tarrant County, Texas, its officers, its affiliated clubs, approved sports organizations, their respective administrators, directors, agents, coaches and other employees, staff, official and volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessees of premises used to conduct the event, all of which are hereinafter referred to as "releasees" from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise. The undersigned shall indemnify the releasees and hold them harmless for any losses, liability of damages which may result from any failure or defect of such releasee.
4. (a) All entries are final; no refunds will be given. (b) I fully understand that any medical treatment given will be of a first aid treatment type only. (c) I consent that any pictures furnished by me or any and all photographs or video images taken of me in connection with the competition and related events and activities can be reproduced and used for publicity, promotion or other purpose by the USA Karate, its licensees or assigns now or in the future, and published or broadcast by any media whatsoever, and I hereby waive any and all claim for any compensation of any kind in regard thereto. (d) All participation in this competition and related events and activities is by permission only. The Tournament Director or his authorized agent(s) reserve the right to refuse entry to any person, school, team or club.
5. Statement of Health. By my signature below I confirm that I am in sound health and there is no reason why I cannot participate in this championship and/or event. The undersigned having read the above waiver and release in its entirety, understand that they have given up substantial rights by signing it and sign it voluntarily.

- | | | |
|--------------------------|---|---------------|
| 1. _____
Athlete Name | _____
Signature of Athlete/Parent/Guardian | _____
Date |
| 2. _____
Athlete Name | _____
Signature of Athlete/Parent/Guardian | _____
Date |
| 3. _____
Athlete Name | _____
Signature of Athlete/Parent/Guardian | _____
Date |
| 4. _____
Athlete Name | _____
Signature of Athlete/Parent/Guardian | _____
Date |
| 5. _____
Athlete Name | _____
Signature of Athlete/Parent/Guardian | _____
Date |