



USA OPEN CHAMPIONSHIPS NON-ELITE TEAM KATA & TEAM KUMITE REGISTRATION FORM

TEAM NAME: _____

Price: \$150 per team ***ALL TEAM MEMBERS MUST MEET THE AGE REQUIREMENTS**

Category: All Non-Elite Team Kata Divisions are mixed gender. Teams may be made up of males and/or females. (3 athletes maximum)

- | | |
|---|---|
| <input type="checkbox"/> TK1 7 & Under Team Kata Beg/Nov
<input type="checkbox"/> TK2 7 & Under Team Kata Int/Adv
<input type="checkbox"/> TK3 8-9 Team Kata Beg/Nov
<input type="checkbox"/> TK4 8-9 Team Kata Int/Adv
<input type="checkbox"/> TK5 10-11 Team Kata Beg/Nov
<input type="checkbox"/> TK6 10-11 Team Kata Int/Adv
<input type="checkbox"/> TK7 12-13 Team Kata Beg/Nov | <input type="checkbox"/> TK8 12-13 Team Kata Int/Adv
<input type="checkbox"/> TK9 14-17 Team Kata Beg/Nov
<input type="checkbox"/> TK10 14-17 Team Kata Int/Adv
<input type="checkbox"/> TK11 18-34 Team Kata Beg/Nov
<input type="checkbox"/> TK12 18-34 Team Kata Int/Adv
<input type="checkbox"/> TK13 35+ Team Kata Beg/Nov
<input type="checkbox"/> TK14 35+ Team Kata Int/Adv |
|---|---|

All Non-Elite Kumite Teams must meet the required age and rank for that specific division.
(4 athletes maximum)

- | | |
|--|--|
| <input type="checkbox"/> TS1 7 & Under Male Beg/Nov
<input type="checkbox"/> TS2 7 & Under Male Int/Adv
<input type="checkbox"/> TS3 7 & Under Female Beg/Nov
<input type="checkbox"/> TS4 7 & Under Female Int/Adv
<input type="checkbox"/> TS5 8-9 Male Beg/Nov
<input type="checkbox"/> TS6 8-9 Male Int/Adv
<input type="checkbox"/> TS7 8-9 Female Beg/Nov
<input type="checkbox"/> TS8 8-9 Female Int/Adv
<input type="checkbox"/> TS9 10-11 Male Beg/Nov
<input type="checkbox"/> TS10 10-11 Male Int/Adv
<input type="checkbox"/> TS11 10-11 Female Beg/Nov
<input type="checkbox"/> TS12 10-11 Female Int/Adv
<input type="checkbox"/> TS13 12-13 Male Beg/Nov
<input type="checkbox"/> TS14 12-13 Male Int/Adv
<input type="checkbox"/> TS15 12-13 Female Beg/Nov
<input type="checkbox"/> TS16 12-13 Female Int/Adv | <input type="checkbox"/> TS17 14-15 Male Beg/Nov
<input type="checkbox"/> TS18 14-15 Male Int/Adv
<input type="checkbox"/> TS19 14-15 Female Beg/Nov
<input type="checkbox"/> TS20 14-15 Female Int/Adv
<input type="checkbox"/> TS21 16-17 Male Beg/Nov
<input type="checkbox"/> TS22 16-17 Male Int/Adv
<input type="checkbox"/> TS23 16-17 Female Beg/Nov
<input type="checkbox"/> TS24 16-17 Female Int/Adv
<input type="checkbox"/> TS25 18-34 Male Beg/Nov
<input type="checkbox"/> TS26 18-34 Male Int/Adv
<input type="checkbox"/> TS27 18-34 Female Beg/Nov
<input type="checkbox"/> TS28 18-34 Female Int/Adv
<input type="checkbox"/> TS29 35+ Male Beg/Nov
<input type="checkbox"/> TS30 35+ Male Int/Adv
<input type="checkbox"/> TS31 35+ Female Beg/Nov
<input type="checkbox"/> TS32 35+ Female Int/Adv |
|--|--|

Name	Membership Number	Age
1.		
2.		
3.		
4.		

(Must be filled out and returned with your Team Entree Form)

**Adult and Minor (under 18) Amateur Athletic
Waiver and Release of Liability**

In consideration of being allowed to participate in any way in the USA National Karate-do Federation athletics/sports program, 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 USA Open Karate Championships 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, inaction's or negligence but the actions, inaction's 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 this 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 The USA National Karate-do Federation, Caesars Entertainment, Paris Las Vegas Hotel & Casino, Bally's, City of Las Vegas, Clark County, Nevada 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 or damages which may result from any failure or defect of such release.

4. All entries are final, no refunds will be given. I fully understand that any medical treatment given will be of a first aid treatment type only. I consent that any pictures furnished by me or any and all photographs or video images taken of me in connection with the Tournament can be reproduced and used for publicity, promotion or other purpose by the USA-NKF, it's 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. All participation in any event or class in this Tournament 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 has read the above waiver and release, understand that they have given up substantial rights by signing it and sign it voluntarily.

1.	_____	_____	_____
	Signature of Contestant	Signature of Parent/Guardian	
	Date		
2.	_____	_____	_____
	Signature of Contestant	Signature of Parent/Guardian	
	Date		
3.	_____	_____	_____
	Signature of Contestant	Signature of Parent/Guardian	
	Date		
4.	_____	_____	_____
	Signature of Contestant	Signature of Parent/Guardian	
	Date		

