# Alabama USA-NKF Regional Qualifier
## May 3, 2008

Bluff Park United Methodist Church/Gymnasium - 733 Valley Street, Birmingham, AL 35226

**Ages 5-17: (Kyu Rank)**
Novice = 7th kyu & under
Intermediate = 6th kyu – 3rd Kyu
Advanced = 2nd kyu and up

**Adult Divisions: (Training Years)**
Beginner = 1 year and under
Novice = 1 to 2 years
Intermediate = 2 to 3 years
Advanced = 3 years & up

☐ Male ☐ Female ☐ Beginner ☐ Novice ☐ Intermediate ☐ Advanced

As of May 1, 2008: Age: _____ (Example: 9.9) Years of Training: _____ (Examples: less than 1 or 2.5)

| Division(s) Entering In: | Fee(s): | Owed: |
|---|---|---|
| ☐ Kata (Form) | 2008 USA-NKF Membership: $50.00 | |
| ☐ Kobudo (Weapons Form) | One or Two Divisions: $45.00 | |
| ☐ Kumite (Sparring) | Additional Divisions: $10.00/each | |
| ☐ Iaido (Sword Form) | Late Registration Fee: $20 (Postmarked after April 28) | |
| | **Total:** | |
| ☐ Team Kata *(Additional Form Required)* | *(Additional form with payment is required)* | |
| *Money orders should be made payable to:* ***USA Martial Arts*** *– Checks not accepted.* | | |

**HEALTH INSURANCE IS REQUIRED FOR ALL ATHLETES AS A CONDITION OF PARTICIPATION**

☐ I have medical insurance ☐ I would like to apply for secondary medical insurance. $50

Name: _____ Date of Birth: _____ 2008 USA-NKF # _____

Address: _____ Phone #: _____

City: _____ State: ____ Zip: _____ E-Mail Address: _____

Karate Rank: _____ Instructor's Name: _____ Style: _____

Martial Arts School: _____ Address: _____

**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 athletics/sports, and related events and activities, the undersigned:

1. Agrees that prior to participating, they (if under 19) Parent or Guardian, will inspect the facility and equipment to be used, and if the participation and/or Parent/Guardian, believes anything is unsafe, they will immediately advise their coach or supervisor or USA National Karate-do Federation Championships personnel of such condition(s) and refuse to participate.

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 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. Assume 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, Event Venue, City and Country of the Event, its officers, its affiliated clubs, regional sports organization, their respective administrators, directors, agents, coaches and other employees 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.

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 pictures taken of me in connection with the Tournament can be used for publicity, promotion or television showing now or in the future, and I waived compensation in regard thereto. All participation in any event or class in this Tournament is by permission only. The Director or his authorized agent(s) reserve the right to refuse entry to any person, school, team or club. Please Note: All Contestants must be USA-NKF 2008 Registered Athletes.

5. **PLEASE NOTE:** All athletes must be covered by health or medical insurance in order to compete. Participant Secondary Medical Insurance is included as a benefit of USA-NKF membership. Non-members without medical insurance coverage may obtain Secondary Medical Insurance for $50.00, which includes 2008 membership in the USA-NKF. Please see Registration Desk personnel for necessary forms.

6. **Statement of Health.** By my and/or Parent/Guardian's 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.

| Signature of Contestant | Signature of Parent/Guardian | Date |
|---|---|---|

*Mail Pre-Registration to: USA Martial Arts – c/o Van Bushnell – 2290 Capri Drive – Birmingham, AL 35226. All information must be completed prior to processing. All contestants must be 2008 USA-NKF registered athletes. Parents, Guardians and those of legal age should apprise themselves of the USA-NKF rules and regulations at www.usankf.org prior to registration.* ***NO FAXES ACCEPTED.***