



Massachusetts Karate Championships Tournament Registration Form

Date: Sunday, November 2, 2008
Time: 9:30 a.m.
Location: Sutton High School
383 Boston Road
Sutton, MA 01590

T-shirt pre order (\$15 youth / \$20 adult)
Youth S (6-8) ____ Youth M (10-12) ____
Youth L (14-16) ____ Adult S ____
Adult M ____ Adult L ____
Adult XL ____

Indicate quantity! Pre-order must be done by October 17th!

Name: _____, _____
Last First

Age: _____ Sex: Male Female

Address: _____

Weight: _____ Height: _____

City: _____ State: _____ Zip: _____

Belt Color/Rank: _____

Email: _____

Months/Yrs. Training: _____

Dojo Name: _____

Sensei Name: _____

I WISH TO COMPETE IN:

- Kata Division
 Kumite Division
 Kobudo Division

(see chart for division #s)

ALL FEES ARE FINAL:

- One event \$50.00
- Two events \$55.00
- Three events \$60.00
- Team Event (please submit separate team application)
- **After October 25th a \$15.00 late fee will apply**

Remit payment to: **Rossini Karate & Aiki-Jitsu, LLC**; 57 East Main Street Suite 100; Westboro, MA 01581
Questions: (774) 239 1346 / eric.rossini@charter.net

Adult & Minor Amateur Athletic Waiver and Release of Liability:

I, the undersigned do hereby volunteer my application for the attendance and participation in the Rossini Karate & Aiki-Jitsu, LLC Massachusetts Karate Championships at Sutton High School on November 2, 2008 and do hereby assume full responsibility for all injuries, damages or losses that I or my child may sustain or incur, if any, while attending/participating. The undersigned agrees to defend, indemnify, and hold harmless Rossini Karate & Aiki-Jitsu, LLC, its officers, managers, members, employees, agents and coaches/instructors and their successors and assigns from and against all legal liability, claims, suits, damages, losses, and expenses, including attorney fees, threatened or incurred, and arising from participation, or from any cause whatsoever. I fully realize that participation in the Massachusetts Karate Championships can be dangerous and could result in serious injury or possibly death and freely assume that risk. In the event of an emergency, I give permission for Rossini Karate & Aiki-Jitsu, LLC to give myself or my child first aid and to arrange for transportation to a hospital and to receive emergency medical treatment. I will assume all costs for medical care and transportation. Please list below any current or previous accidents, illnesses, or physical limitations that could impact, stop, or prevent you or your child from participating in the Massachusetts Karate Championships.

1. Allergies: _____
2. Medications: _____
3. Physical Limitations: _____

The above-named participant is physically able to participate in the Massachusetts Karate Championships without limitations (except as described above). I release permission for use of my or my child's picture for promotional material including brochures, advertisements, or Massdojo.com website. Names are not used in any promotional material.

Signature: _____ Date: _____

Parent/Guardian (if participant is under 18): _____

Please **NOTE**: Divisions may be combined at the discretion of tournament director to insure adequate match competition for all participants.