



MSK CHIRSTMAS GAME

December 13, 2014 Start 9:00 AM



Registration Form

Name: _____ Date of Birth mm/dd/yy: ____/____/____

Address: _____ Phone: _____

City: _____ State: ____ Zip: _____ Email: _____

School: _____ Instructor: _____

Remit Registration Fees to: Mo's Shotokan Karate 590 East Chatham St, Suite 108, Cary, NC 27511

Events	Pre-Registration	Door Registration
Weapons Kata & Kumite	\$35.00	\$35.00

Gender	Age	Skill Level	Events Entered
<input type="checkbox"/> Male <input type="checkbox"/> Female	Age on 12/13/2014 _____	<input type="checkbox"/> Beginner (White-Yellow Orange) <input type="checkbox"/> Novice (Green-Blue) <input type="checkbox"/> Intermediate (Purple-Brown) <input type="checkbox"/> Advanced Traditional (Black) <input type="checkbox"/> Advanced Open (Black)	<input type="checkbox"/> Weapons <input type="checkbox"/> Kata <input type="checkbox"/> Kumite

Athletic Waiver and Release of Liability

In order for my child or me to participate in the MSK Christmas Game 2014, I agree to assume the risks incidental to such participation and, on my own behalf and on behalf of my heirs, executors and administrators, release and forever discharge the released parties defined below, of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with participation of my child or me in such activity and further damages, costs or expenses, including, but not limited to, attorney's fees and disbursements. For this event, the released parties are Mo's Shotokan Karate, City of Cary Parks and Recreation Department, Amateur Athletic, its affiliated clubs. Regional 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. I understand that this release and indemnity agreement includes any claims based on the negligence, action, or inaction of any of the above released parties and covers bodily injury (including death) and property damage, whether suffered by myself or my child, before, during or after such participation. I declare that I and/or my child is physically fit, and has the skill level required to participate in this particular event. I further authorize medical treatment for my child or myself at my costs, if the need arises. I grant the released parties the right to photograph and/or videotape me and further to use my name, face, likeness, voice and appearance in connection with the exhibitions, publicity, advertising, and promotional materials without reservation or limitation.

Signature of Contestant

Signature of Parent/Guardian (if under age 18)