

2017 CALIFORNIA KARATE CHAMPIONSHIPS REGISTRATION FORM

REGISTRATION MUST BE POSTMARKED BY PRE REG DATE FOR PRE REG PRICES TO BE HONORED - THANK YOU!
 Make Copies Of This Registration Form - Please Print Clearly - One Form Per Competitor - Please Print Clearly - Make Copies Of This Registration Form

1. COMPETITOR INFORMATION:

Last Name: _____ First: _____ M/ F: ___ Weight: _____

Rank: (Circle) NOV INT ADV BLK E-Mail: _____

Birthdate: ____/____/____ Competition Age (as of 1/1/17): _____

Address: _____ City: _____ State _____ ZIP _____

Home Ph: _____ - _____ - _____ Emergency Ph: _____ - _____ - _____

Instructor: _____ Team: _____

Dojo: _____ Emergency Ph: _____ - _____ - _____

2. LIST DIV #'S ENTERING:

1 _____

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 Example- K-5 _____

Please Print
Clearly

PLEASE MAKE CHECKS OUT TO **STORMLINE**
 CREDIT CARD PAYMENTS AVAILABLE ONLINE AT **CKCHAMPIONSHIPS.COM** OR AT THE DOOR

3. DEADLINES, FEES & PAYMENT INFORMATION:

PRE-REG BEFORE OCT 28 AT DOOR QTY X COST= TOTAL
 MAIL IN

2017 CA KARATE CHAMPIONSHIPS	COMPETITORS	YOU CAN ALSO GO TO CKCHAMPIONSHIPS.COM TO REGISTER ONLINE		
Tournament Date: November 4, 2017 Location: Jessie Bethel HS 1800 Ascot Pkwy, Vallejo, CA 94591 Doors Open: 8:30AM Competition: 10:00AM - 3:30PM Awards/Grand Show: 4:30PM - 8:00PM Promoter: CKC Promoters Website: www.ckchampionships.com Phone: 707-333-1649	Each Division	\$60	\$75	_____ X \$_____ = \$_____
	SPECTATORS and COACHES			
	Spectators 5 & Under Free	\$15	\$20	_____ X \$_____ = \$_____
	Coach's Pass (includes entrance)	\$20	\$30	_____ X \$_____ = \$_____
	Awards/Grand Show	FREE		TOTAL DUE = \$_____

4. COMPETITORS & PARENTS PLEASE READ & SIGN BELOW

To be filled in by CKC Staff ONLY.

RCVD: ____/____/____ AMT: \$ _____ #: _____ Processed by _____

STAMP

I, hereby waive any and all rights or claims I may have against the California Karate Championships, Stormline, it's events, it's staff, vendor's, volunteers or Sponsors, Cities and Districts of California Karate Championships Sanctioned events, all California Karate Championships Sanctioned Tournaments, and all their agents, servants & employees, and I hereby release & discharge them from any and all claims resulting from injuries, including death, damages or loss, which may accrue to me or my heirs arising out of or in any way connected with my attendance &/or participation at any California Karate Championships sanctioned event. I represent and warrant that I am physically and mentally fit, able to participate, & I do hereby assume responsibility for my own well-being, understanding that participation involves bodily contact. I have read, understand and agree to abide by the California Karate Championships rules associated with California Karate Championships events & assume all responsibility & any liability for infringement of such rules & agree to accept the tournament arbitrator's decision as final. I consent to allow any reproductions of me or likeness created in any manner whatsoever, photographed, filmed or video taped in connection with the California Karate Championships events which can be used for instruction, publicity, promotion or television broadcast & I waive any & all compensation in regards thereto. I agree that I have obtained permission from the artist's of any music I use in conjunction with my competition & verify by signing this permission that in doing such, I will indemnify, defend & hold harmless all the above named parties from any liability for use of such music & that this artist's permission permits the above named parties to use such music in recorded performances of myself for instructional purposes, publicity, promotion, video &/or televised broadcast & I waive any & all compensation for such.

X STAFF/OFFICIALS MUST ALSO SIGN THIS WAIVER
 Competitor or Parent/Guardian Signature Assuming responsibility if under 18 _____ DATE _____

Checkklist - DID YOU:

- Fill in the correct division #'s @ BOX 2? (Double check! CKC is not responsible for divisional entry errors. Absolutely NO AT DOOR Division Switching.)
- Please Sign the release on this enrollment form and fill out player cards per div.
- Make M.O./Checks for correct amount payable to: **STORMLINE**
- Mail **THIS FORM, & PAYMENT** to: **Stormline**



2514 Marshfield Road,
Vallejo, CA 94591

Questions? Call 707-333-1649

POSITIVELY NO REFUNDS - PLEASE DON'T ASK

Thank you for your **HARD WORK & LOYAL SUPPORT** for the **CKC FINALS!**

Circle: Judge Score/Time keeper Other _____ Are you Competing? Y/ N _____

Rules experienced in: SKITA NASKA Other _____ Style(s) _____ Yrs exp. Officiating: _____

Judging Preferences: (Circle) **Forms** - Trad / Contemp **Sparring**- Point / Team **Weapons**- Trad / Contemp

Name _____ Age _____ Phone: _____ Mobile: _____

Address _____ City _____ ST _____ Zip _____

Dojo: _____ Phone _____ E-mail: _____