

**Supreme Way Challenge
Open Martial Arts Tournament**

Name _____ Age _____

Male Female Rank/Belt Color _____ / _____

Address _____

City _____ State _____ Zip _____

Email _____ USKK # _____ PKC # _____

School _____ Instructor's Name _____

Events (check all you wish to participate in)

- Sparring Forms Weapons Self-defense
 Sword Fighting Synchronized Forms

One event _____ \$40 _____

Additional events _____ x \$5 = _____

Spectators (4 and older) _____ x \$5 = _____

Sub total _____

- \$5 for USKK membership Total _____

I, the undersigned, do hereby voluntarily submit my application for participation in the Supreme Way Challenge Open Martial Arts Tournament. I do hereby further agree to indemnify and hold harmless the Kosho-Kai Karate School, United States Karate-do Kai, Professional Karate Commission, and Pekin Moose Lodge and all officers, shareholders, agents, employees, and representatives of said organization individually or otherwise for any claims or injuries that I may sustain. I represent to the afore mentioned that I am in good physical health and that I have no disability, impairment, illness, or condition preventing me from participating in said martial arts tournament. I further understand that any medical aid or treatment administered to me as a result of any injury will be of a first aid nature only. I have fully read and understand all the terms and conditions of this waiver of liability and voluntarily agree to all terms and conditions herein.

Signature _____ Date _____

Parent of guardian (if under 18) _____ Date _____