

Tournament Registration Form

Name: _____ PKC# _____ Belt/Rank: _____

Telephone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Club: Advancing Karate, Ltd. - Sensei A. Kaufman Phone: 419-509-4277

Address: P.O. Box 162 City: Perrysburg State: OH Zip: 43552

I do hereby submit my application for participation in this PKC Region #2 LLC. Karate event, and I will assume all risk of personal injury (including death) and losses which I may incur by my participation. Acting for myself and my heirs and assignees, I do hereby release the PKC, The PKC Region 2 LLC, the officials of the tournament, all of the contestants, the promoter/host Steven Franz, Franz Karate, Dean V Kruse Foundation, and any other individuals or organizations connected in any way this tournament from any liabilities. I also understand that I must have my own insurance policy.

Competitor Signature: _____ Date: _____

Parent or Guardian if competitor is under 18 _____

Please check what you will be competing in:

KATA _____ CHANBARA _____ WEAPONS _____ DEMONSTRATION _____ KUMITE _____

Entry Fees:

- \$50 for one or all events
- \$5 discount with PKC Card
- \$5 discount per family member (in same household up to 4)

Spectator Fees:

- 6 & Older \$5 / person
- Under 5 Free

Competitor Fees:	\$ _____
Spectator Fees:	\$ _____
Total Enclosed:	\$ _____

Checks for tournament fees and forms must be mailed to:

**FRANZ KARATE
216 S Main Street
Bryan, OH 43506**

must be mailed no later than October 1st.

Advancing Karate Students:
Submit form & fee to Sensei Kaufman by 9/26 to be mailed together as a dojo!
Questions? 419-509-4277