SAVE $$ AND AVOID WAITING IN LINE * PRE-REGISTER

8TH ANNUAL EUREKA SPRINGS *MARTIAL ARTS CLASSIC* TOURNAMENT

SATURDAY, APRIL 19, 2008 Tournament Start Time - 10:00 A.M.

NAME_____AGE_____(As of 6/30/08) SEX_____
ADDRESS_____CITY_____STATE_____ZIP_____
HOME
PHONE_____CELLULAR_____Email_____
STYLE_____ BELT COLOR & KYU RANK_____
SCHOOL_____INSTRUCTOR_____
SCHOOL
ADDRESS_____CITY_____STATE_____ZIP_____
AKA Member_____ ****THE SCHOOL OWNER WHO BRINGS THE MOST **** COMPETITORS WILL WIN A $10 REBATE PER STUDENT!!!

PRE-REGISTRATION (By mail, postmarked PRIOR to April 5th, 2008* Absolutely No Exceptions, Checks Accepted)
$40 Per Contestant Includes **3 Events** * Forms, Sparring, Weapons, Xtreme, Musical
$5 Each Additional Event **$50** for Demo Teams

$5.00 DISCOUNT ANYTIME FOR AKA Competitors, $3.00 DISCOUNT FOR A.K.A. ASSOCIATE Spectators

REGISTRATION APRIL 5th OR AFTER OR AT DOOR CHECK-IN ON APR. 19, 2008, CASH ONLY ACCEPTED:
$40 Per Contestant Includes **2 Events** * Forms, Sparring, Weapons, Xtreme, Musical
$10 Each Additional Event **$50** for Demo Teams
SPECTATOR FEES
All Spectators***$**5.00** (AKA So Reg Associate Members Receive $3 Discount) Youths 3 & Under***.**Free**

PLEASE STATE THE COMPLETE DIVISION, INCLUDING AGE AND RANK

2-Rank Divisions: **Novice** White/Orange/Yellow/Next Color or **AOC** (All Other Colors)
3-Rank Divisions: **Novice** White/Orange/Yellow or **Intermediate** Blue/Green/Purple
or **Advanced** Red/Brown **or** Black Belt/Black Sash

DEMO TEAM (3 OR MORE) OR TEAM FORMS (2)_____
XTREME & MUSICAL FORMS _____
XTREME & MUSICAL WEAPONS_____
OPEN FORMS_____
OPEN WEAPONS_____
SPARRING_____
KARATE FLAG_____
A.K.A. IDOL DIVISION ($5.00 EXTRA)_____

FOLLOWING WAIVER MUST BE SIGNED PRIOR TO PARTICIPATION

I AGREE TO ALL THE TERMS AND CONDITIONS OF THE LIABILITY WAIVER. I AGREE TO ASSUME FULL RESPONSIBILITY FOR ANY AND ALL DAMAGES, INJURIES OR LOSSES THAT I MAY SUSTAIN OR INCUR, IF ANY, WHILE ATTENDING OR PARTICIPATING AND HEREBY WAIVE ANY AND ALL CLAIMS AGAINST THE AMERICAN KARATE ASSOCIATION, EUREKA SPRINGS HIGH SCHOOL, PROMOTERS OR OPERATORS OR SPONSORS OF THEIR MARTIAL ARTS TOURNAMENT FOR ANY CLAIM, FOR I UNDERSTAND THAT THE MARTIAL ARTS TOURNAMENTS INVOLVE SIGNIFICANT AND SUBSTANTIAL PHYSICAL CONTACT BETWEEN THE PARTICIPANTS AND THE COMPETITORS MAY RECEIVE INJURIES AS A RESULT. I HAVE READ AND UNDERSTAND THIS RELEASE AND UNDERSTAND ALL OF THE ITEMS. I VOLUNTARILY EXECUTE IT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE. I ALSO UNDERSTAND THAT ANY PICTURES OR MOVIES TAKEN AT THE TOURNAMENT BELONG TO THE TOURNAMENT DIRECTOR AND THE TOURNAMENT DIRECTOR HAS MY PERMISSION TO USE THESE PICTURES OR MOVIES TO PROMOTE THIS OR ANY FUTURE TOURNAMENT. I FURTHER ACKNOWLEDGE THAT I WAIVE ANY COMPENSATION FOR THESE PICTURES OR MOVIES IF THEY ARE USED.

SIGNATURE_____
GUARDIAN (If Under 18)_____
DATE_____ **POSITIVELY NO REFUNDS AFTER TOURNAMENT BEGINS**

MAIL THIS COMPLETED FORM & MONEY ORDER/CHECK **PAYABLE TO Groves Karate Studio**
C/O Groves Karate Studio, 4052-F East VanBuren St., Eureka Springs, AR 72632