

WORLD OYAMA KARATE ULTIMATE CHALLENGE KARATE CHAMPIONSHIP

The Exceptional Foundation
Sunday, December 3, 2023



CHILDREN DIVISION --KATA--

☐ Beginner	☐ Interme	diate	☐ Advance	
REGISTRATIO	N: 1:30 P.M.		COMPETITION:	2:00 P.M.
ENTRY FEE: \$ 35.00 (\$25 if fighting also)				
Name:		Age:	Rank:	
	S:			
Phone:				
	Instructor:			
Dojo Address:		Dojo Phone:		
□ CASH	CHECK#		DIT CARD (Visa/M	•
	MAKE CHECK PAYABLE TO: WORLD OYAMA KARATE	Card Number		
	MAIL TO: WORLD OYAMA KARATE	Expiration Date		
	1804 29 TH Ave South Birmingham, AL 35209	Signature _		
Alabama on Sund Y. Oyama, their a including court an become obligated Challenge Knockd agents or employ Knockdown Karat	RATE CHAMPIONSHIP, CHILDREN'S lay, December 3, 2023. I hereby agree to gents or employees, and my fellow particular litigation costs and attorney's fees, of the to pay by reason of any injury sustained down Karate Championship. It is my wis rees, and my fellow participants if I am ree Championship. I know the risks that I are derstand that any treatment given me, as	to indemnify and he ipants from and ag whatever nature controlled or incurred by the to indemnify World as a resum taking and voluments.	old harmless World C gainst all liability, loss, or type that I may here me as a result of my orld Oyama Karate, So ult of my participation untarily agree and cor	Dyama Karate, Saiko Shihan damage, cost and expense, ein after suffer, incur, pay or participation in the Ultimate aiko Shihan Y. Oyama, their in the Ultimate Challenge esent to assume those risks.
reproductions of r	nt that any reproductions of my likene my likeness that of me in connection with promotion, television showing, or instruc-	h the Ultimate Cha	allenge Knockdown K	arate Championship can be
My sign	ature on this application is a knowing herein, and upon which I intend the p	representation t	hat I have fully read	•
If under	18, this release and consent must also b	e signed by a pare	ent or guardian.	
Applicant's signature Date		Parent's signature Date		
	YAMA KARATE RESERVES THE F			
	CHILDREN	KATA DIVI	SION	
Name:		Age:	Rank:	
	S:			

Dojo Address: _____ Dojo Phone: _____