

# Waiver and Payment Form

***KYOKUSHIN'S XXVII  
AMERICAN INTERNATIONAL KARATE CHAMPIONSHIPS  
Saturday October 7, 2017***

**This form is used for competitors registered online.**

Check or money order only please. Have money order payable in **US FUNDS** to: **American International Karate, Inc.**  
Mail to:

**Kyokushin Karate Fitness USA**  
482 West Ridge Road  
Rochester, NY 14615 USA

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

One event is \$45 and \$10 for each additional event

**\*\*add \$10.00 after September 30th, 2017\*\*\***

**All entry fees are non refundable.**

Amount Paid: \_\_\_\_\_

## **CONDITIONS OF REGISTRATION**

I, the undersigned, do hereby voluntarily submit my application for participation as a competitor in the American International Karate Championships on October 7, 2017 in Rochester, NY and do hereby assume full responsibility for any and all damages, injuries or losses, including death that I may sustain or incur while attending or participating in the aforementioned event and do hereby waive any or all claims against American International Karate Inc. its promoters, operators and/or sponsors of said event, their employees and agents, individually or otherwise, and specifically covenant not to bring suit to the individuals or organizations mentioned above, fully recognizing that this covenant is part consideration for my approval to compete, and upon which they have relied in accepting the above application. I further understand and am fully aware of the inherent risks of sustaining injury during the competition or in the preparation thereof and that I completely assume all risks and liabilities thereto. I fully understand that any medical treatment provided to me as a response to injury will be of the first aid type only. I also fully understand that I am solely responsible for payment for any additional medical services performed as a result of my injury.

X \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_ X \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

**Applicant's Signature**

**Parent or Guardian (If under 18 years of age)**