

Kirby's Karate Academy ***Wado-Ryu Karate Tournament***

(this is a Wado tournament, not an open tournament)

**Join us for a Martial Arts Seminar,
Followed by Kata and Sparring Competition**

Featuring Demonstrations by:

**Sensei Jimmy Edwards & Joelton Bushido Demo Team
Satori-Ryu Demo Team – Sensei's Sheena & David Henderson**

With Special Guests:

**Sensei John Patterson
Sensei Taylor Hayden**

With Sensei's:

**Dale Kirby – 7th Dan
Jimmy Edwards – 7th Dan
Melvin Brown – 7th Dan
Fred Martin – 6th Dan
Steve O'Riley – 6th Dan
Jeffrey Buckner Ford – 6th Dan
Larry Shutz – 5th Dan**

Large nice karate medals for 1st, 2nd & 3rd places. This event is low cost and a very rewarding event for all. Learn from of the top Wado Sensei's in the Tennessee area. All senior Wado Sensei's are welcome to help in the seminars and the tournament.

WHEN: Saturday, May 28th, 2016
9:30 AM - 10:30 AM (registration)
10:30 AM - 11:30 AM (seminar)
11:30 AM - 12:00 PM (demo)
12:00 PM - 2:00 PM (tournament)

WHERE: Kirby's Karate Academy
805 N. Broadway - Portland, TN 37148

COMPLETE REGISTRATION FORM ON BACK

Please call if you need additional information:

School: (615) 323-0365
Sensei Dale Kirby: (615) 948-8621
Jason Hanks: (615) 400-8546

For directions, visit:

www.kirbyskarateacademy.com

805 N. Broadway • P.O. Box 85 • Portland, TN 37148 • (615) 323-0365



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Wado-Ryu Karate Tournament – Saturday, May 28th, 2016
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Please send registration forms to:
 Kirby's Karate Academy
 P.O. Box 85
 Portland, TN 37148
WWW.KIRBYSKARATEACADEMY.COM

REGISTRATION: 9:30-10:30AM - SEMINAR: 10:30-11:30AM - TOURNAMENT: 12:00-2:00PM

REGISTRATION FORM

Last Name:.....	First Name:.....
Instructor Name:..... School Name:.....	
Street Address:.....	City:..... State:..... Zip:.....
Telephone:..... E-Mail:.....	
Age:.....	D.O.B:..... Height:..... Weight:.....
Rank:..... Martial Arts Style:.....	

*****No leather sparring gear acceptable. Foam rubber sparring gear only, mouth protection mandatory for all competitors***
 Spectators may want to bring additional chairs. Snacks and water will be available for purchase.**

Events of entry: Seminar: _____ Forms: _____ Sparring: _____

Competition Level: Age: _____ Beginner: _____ Intermediate: _____ Advanced: _____ Black Belt: _____

Entry fees (non-refundable)

Seminar Fee:	_____ \$10.00 Seminar Only
Competition Fee:	_____ \$20.00 Forms and Sparring
Seminar & Competition	_____ \$30.00 Seminar, Forms & Sparring
Spectator Fee:	_____ \$3.00 (12 yrs. & up)
	_____ \$2.00 (5-11 yrs.)
	(children 5 & under free)
Total:	\$ _____

Make checks payable to: Kirby's Karate Academy (address above)

LIABILITY OF WAIVER

(If downloading, this must be signed and returned with application!)

In consideration of your acceptance of my registration, I do hereby waive, release and discharge forever, for myself, my heirs, executors and administrators, any and all rights and legal claims for damages I have in connection with this event, its agents, sponsors, supporters, volunteers, successors and representatives. I have full knowledge of the risks involved in this event, and certify that I am physically fit and sufficiently trained to participate in this event. I also certify that I have NO MEDICAL CONDITION(S) that may or will cause injury to myself or others by my participation in the Kirby's Karate Academy Championship Tournament and waive my rights to any compensation in the event my picture is used for publicity in connection with the tournament.

I do also hereby release Kirby's Karate Academy, Dale Kirby, the promoters and/or their heirs, the Kirby's Karate Academy Championship and/or their employees, the arbitrators, and/or lessees of premise, my personal representatives, assigns, heirs guardians and/or next of kin for any/all damages and any claim or demands therefore on account of injury to the person or property or resulting in the death of the undersigned, whether caused by negligence of releases, accident or otherwise while the undersigned is in or upon the restricted area and/or competing in, observing or working for, or any other purpose participating in this event.

NAME: _____ SIGNATURE: _____

PARENT/GUARDIAN: _____ DATE: _____