

In collaboration with the
TAT WONG KUNG FU ACADEMIES & the FIVE ANIMALS KUNG FU ACADEMY



2018 CHAMPIONSHIP

Sunday, May 6th
Alameda High School Gym
 2201 Encinal Ave, Alameda, CA 94501
<https://alamedaca.gov/recreation/locations/2341/alameda-high-school-gym>

COMPETITOR INFO:
 8:00am - Competitors Arrive & Check -In
 9:00am - Opening Ceremony & Performance
 10:00am - Competition Begins
 12:00pm - Adults begin
\$5 Spectator Tickets (All ticket proceeds go to Project Night Night)
<http://www.projectnightnight.org/>

- * IMPROVE SKILLS & CONFIDENCE
- * GAIN EXPERIENCE
- * MAKE FRIENDS!

HAND & WEAPON FORMS, & SPARRING for all ages & levels. Plus... 3 - STAR GRAND CHAMPION Divisions
REGISTER & Updates at: onetribe martial arts.com

 Please fill out ALL the information (please print neatly)

Name _____ Location: SF ___ OT ___ SM ___ 5A ___
Last First Middle

Address _____ City _____ State _____ ZIP _____

Phone (____) _____ Email _____

VERY IMPORTANT: Belt _____ Age _____

Check all the divisions you will be competing in. You can always add more later on a separate form:

FORMS: Hand Form ___ Short Weapon Form ___ Long Weapon Form ___

3-Star (hand form, long weapon, short weapon) ___ Creative ___ Group (List Members): ___

SPARRING: Team (12 & below) ___ Continuous (13 & Up) ___ Weapon (sword) ___ Weapon (staff) ___

I, the undersigned, do hereby voluntarily submit my application for attendance and participation in the said Martial Arts Championship and hereby assume full responsibility for any and all damages, injuries, or losses that I may sustain or incur, if any, while attending or participating, and I waive all claims against the promoters, or operators, or sponsors of said Martial Arts Championship, individually or otherwise for any claim for injuries that I may sustain. I fully understand that any medical treatment given to me will be of a first aid type only. I consent that any pictures furnished by me or any pictures taken of me in connection with the Championship can be used for publicity, promotion, or television show, and I waive compensation in regards thereto. If under 18, this release and consent waiver is also to be signed by parents or guardian.

Signed(18 & Up) _____ Date _____ Signed (Parent/Guardian) _____

STAFF ONLY:
 Division Numbers:

REGISTRATION FEES
 ONE Division.....\$45.00 (AFTER APR. 22nd- ADD \$20 FEE FOR LATE REGISTRATION) _____
 Each additional division.....\$20.00 _____
 THREE STAR GRAND CHAMPION.....\$75 _____
 SPECTATOR FEE.....\$5 x _____ = _____

Tournament fees are non-refundable TOTAL CLOSED: _____