

5th I.K.O.MATSUSHIMA KYOKUSHIN KARATE WORLD CUP CHINA 2018

First Name:																		
Family Name:																		
Address:																		
Country													Postcode					
Tournament Experience:												3 passport size head & shoulders Photographs:						

Phone:		Fax:		Date of birth: / /
Height(cm):		Weight(kg):		

Passport No.	
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Current grade: (Please attach copy of dan certificate)

Signature of Branch Chief:
Signature of Guardian (for boys & girls):

Weight Divisions – Mark (X) the appropriate box on the left side of your division:

Heavy Weight	Middle Weight	Light Weight
Boys aged 14-15 Over 60kg	Boys aged 14-15 55-60kg	Boys aged 14-15 Under 55kg
Girls aged 14-15 Over 55kg	Girls aged 14-15 50-55kg	Girls aged 14-15 Under 50kg
Boys aged 16-17 Over 65kg	Boys aged 16-17 60-65kg	Boys aged 16-17 Under 60kg
Girls aged 16-17 Over 60kg	Girls aged 16-17 55-60kg	Girls aged 16-17 Under 55kg
Male Over 80kg	Male 70-80kg	Male Under 70kg
Female Over 62.5kg	Female 55-62.5kg	Female Under 55kg

Note:

1. Please send Application forms, three photos, copy of Dan certificate, List of fighters, Doctors Certificate to Shanghai Honbu by the closing date: **September 15th, 2018.**
2. Please send the hard copy to the below address:
Room 101, No 38, Lane 2333, Yueluo Road, Baoshan District, Shanghai, China, 201908
Recipients : Cai Zilong
 Please send the soft copy via email: zilon118@hotmail.com
3. It is imperative that the above documents reach us before the official closing date stated above.
4. Please write fighters names as well as the fighters dates of birth on the back of all three photos.

DECLARATION

Note: for the purposes of this declaration the words I.K.O.MATSUSHIMA International Karate Organization Kyokushin- Kaikan will signify all branches, sub-branches or members.

1. I the undersigned on consideration of, and as a condition of acceptance of my entry in the above event, for myself, my heirs, executors and administrators, hereby waive all and any claims fight of cause of action, which I or they might otherwise have arising out of any loss of life or injury, damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequent upon my entry in the said event.

Organizer cannot guarantee any fee for injury, damage or loss of life.

2. This waiver, release and discharge shall be and operates separately in favour of all persons, corporations, and bodies involved or otherwise engaged in promoting or staging the event.

3. MEDICAL DECLARATION

By signing this application the applicant hereby assumes full and total responsibility for his safety and personal possessions and the applicant releases the tournament organisers, agents, sponsors and other competitors from any liability, for any injury or personal loss of any kind whatsoever. The applicant acknowledges that he understands the risks associated with competing in this kind of tournament and that first aid only is provided.

4. A Doctors certificate stating that the application is fit to participate in a full-contact karate tournament, and that the applicant does not have any person to person transferable infection or diseases (HIV, Hepatitis B& C), must accompany the application.

5. After winning the championship, the contestants who have signed up for the competition will voluntarily agree to the organizing committee of the competition to arrange for photographs to be taken, and the photos will be offered free of charge to the sponsors or partners in the form of collective portraits, for a period of one year. After one year, if the sponsor or partner wants to, the organizing committee may arrange the commercial paid spokesperson intermediary service. Please understand and support it.

Name:

Date:

Signature of applicant and declaration: