

BAILEY'S COPPER CITY KARATE CHAMPIONSHIPS

***Strough Middle School 801 Laurel St.**

April 6th, 2019

NAME: _____ AGE: _____

ADDRESS: _____

CITY _____ STATE: _____ ZIP: _____

PHONE: (_____) _____ SCHOOL: _____

INSTRUCTOR: _____ RANK: _____

Please have your instructor answer the following:

According to your schools program, the rank provided above is considered

NOVICE / INTERMEDIATE / ADVANCED / BLACK BELT (all ages)

COMPETITOR FEES

1-3 Events \$45.00

CASH ONLY AT THE DOOR

PRE-REGISTER BY March 22 TO PAY BY CHECK

I WILL COMPETE IN: SPARRING _____ FORMS _____ WEAPONS _____

FORMS/WEAPONS		SPARRING		
Junior Weapons Int/Adv (7+)	Senior Beg/Int/Adv	6 and under Beg/Int/Adv	Senior Men Beg/Adv	Jr. Black Male I age TBA Jr. Black Male II age TBA
Adult Weapons Int/Adv	Men Beg/Int/Adv	7-8 Beg/Int/Adv	Senior Women Beg/Adv	Jr. Black Female I age TBA Jr. Black Female II age TBA
Jr. Black Weapons 15 and under	Women Beg/Int/Adv	9-10 Beg/Int/Adv Boys 9-10 Beg/Int/Adv Girls	Men Beg/Int/Adv	Men Black Light 16-34 Men Black Heavy 16-34
Adult Black Weapons	Junior Black I age TBA Junior Black II age TBA	11-12 Beg/Int/Adv Boys 11-12 Beg/Int/Adv Girls	Women Beg/Int/Adv	Men Senior Black 35 and up
6 and under Beg/Int/Adv	Men Black 16-34	13-15 Beg/Int/Adv Boys 13-15 Beg/Int/Adv Girls		Women Black 16-34
7-8 Beg/Int/Adv	Women Black 16-34			Women Senior Black 35 and up
9-10 Beg/Int/Adv	Senior Black 35 and up			
11-12 Beg/Int/Adv				
13-15 Beg/Int/Adv				

I _____ in consideration for this application, do hereby waive Bailey's Karate Schools Inc. Rome City School District, Rome NY, Vicki Gillen and hold them completely blameless for any injury; physical or emotional; that I may suffer while competing in or attending Bailey's Copper City Championships on April 6, 2019. I further hold blameless any other competitor, spectator, judge or scorekeeper. I understand that Martial arts competition involves body contact, from which injuries may result, and I further understand and/or sought clarification of all the contents of the rules and general information, and I agree with them entirely. I agree to allow, without compensation, the unrestricted use of any photographs, film or videotape of myself.

CONTESTANT

DATE

PARENT OR GUARDIAN (IF UNDER 18)

DATE

Pre-Register to pay with check by March 22.

Checks are payable to Bailey's Karate School. P.O. Box 131 Rome, NY 13442-0131

No checks accepted at the door. All Spectators pay at the door.