



TEAM APPLICATION DUE TUESDAY, OCTOBER 13
ONLY COMPLETED APPLICATIONS WITH SIGNATURES AND FULL PAYMENT WILL BE ACCEPTED

BRANCH _____ INSTRUCTOR _____

TEAM NAME (Encouraged, but optional) _____

BLACK BELT (Shodan or higher): 1 male & 1 female

1. LAST NAME _____ FIRST NAME _____

2. LAST NAME _____ FIRST NAME _____

1. X _____ 2. X _____

BROWN BELT (2nd Kyu or 1st Kyu): 1 male & 1 female

1. LAST NAME _____ FIRST NAME _____

2. LAST NAME _____ FIRST NAME _____

1. X _____ 2. X _____

GREEN BELT (4th Kyu or 3rd Kyu): 1 male & 1 female

1. LAST NAME _____ FIRST NAME _____

2. LAST NAME _____ FIRST NAME _____

1. X _____ 2. X _____

FEE: \$15 PER TEAM MEMBER = \$90 TOTAL

Payment is cash only.

Any team applications submitted after October 13 will incur an additional \$20 late fee.

NO APPLICATION WILL BE ACCEPTED AFTER OCTOBER 15 @ 9:00PM

The applicant warrants, represents and acknowledges that he/she is fully aware of the nature and risks involved in the World Seido Karate Tournament and he/she is physically and mentally fit to participate in such activity. The applicant further agrees that in consideration for being permitted to participate, he/she assumes the risk of any and all accidents and injuries of any kind sustained by him/her by reason of, or in connection with, said Tournament activities. The applicant hereby releases, discharges and absolves ALL STATES GLOBAL KARATE-DO, INC. and THE WORLD SEIDO KARATE ORGANIZATION, its agents and employees of any and all liability and responsibility for any accidents or injuries, whether the same are caused by or attributed to their negligence or the negligence of any of them. The applicant further agrees to assume the risk of any accident or injury of any kind sustained anyplace in the building where said Tournament is held, or on entering or leaving such building and hereby releases, discharges and absolves ALL STATES GLOBAL KARATE-DO, INC. AND THE WORLD SEIDO KARATE ORGANIZATION, its agents and employees of any and all liability and responsibility for any accidents or injuries, whether the same are caused by or attributed to their negligence or the negligence of any of them. The applicant warrants and acknowledges that he/she has read the Tournament rules and regulations and agrees to abide by them. The applicant fully understands that any medical treatment given will be of first aid type only. The applicant consents to the use of, and waives any compensation whatsoever for, all pictures, movies, tapes, TV, media coverage, etc. by ALL STATES GLOBAL KARATE-DO, INC., THE WORLD SEIDO KARATE ORGANIZATION or those designated by them.

ALL STATES GLOBAL KARATE-DO, INC. 61 West 23rd Street New York, NY 10010 Tel:212-924-0511

❖ OFFICE USE ONLY ❖

PAID BY: CASH ONLY AMOUNT \$ _____ DATE ____/____/____ INITIALS _____