

**Master Kim's Black Belt Academy
School Tournament Competitor's Registration**

Name: _____ **Sex (circle one):** M or F

Address: _____

Belt Rank: _____

I, the undersigned, do hereby voluntarily submit this application for attendance and participation in Master Kim's Black Belt Academy Inner-school Tournament, and do hereby resume all responsibility for any or all damages, injuries or losses, including death, that may sustain or incur in any way while attending and participating in Master Kim's Black Belt Academy Inner-school Tournament. I/We do hereby release and waive all claims against the promoter, operators and persons involved of said tournament. Individually or collectively from any and all liability, inclusive of claims and/or suits of law or in equity for any injury which may result directly or otherwise at Master Kim's Black Belt Academy. I further understand that it is my personal responsibility to insure that I wear the required protective equipment (i.e. groin cup, mouth guard) and if I wear glasses, the lenses must be shatterproof safety type. I further understand that any treatment of injuries will be of the First Aid type only.

Participant's Signature: _____ **Date:** _____

**Parent/Guardian
Signature (if under 18):** _____

SPARRING	
Name:	_____
Rank:	_____
Age:	Wt: _____

FORMS	
Name:	_____
Rank:	_____
Age:	Wt: _____

HAMMERFIST BREAKING	
Name:	_____
Rank:	_____
Age:	Wt: _____
# of Boards:	_____
# Broken:	_____

SIDEKICK BREAKING	
Name:	_____
Rank:	_____
Age:	Wt: _____
# of Boards:	_____
# Broken:	_____