



CCIKA's
**3rd Annual Winter Karate
Championship**

Saturday February 12, 2005

Alviso Youth Center • 5040 N. First Street • San Jose, California • 95002

Please check below all that applies:

Male _____ Intermediate _____ Youth _____
Female _____ Advanced _____ Adult _____

Karate School Name _____	Instructor _____
Address _____	Phone _____
City _____	State _____ Zip _____

Team Name _____

Three Person Team Kata

<u>Name</u>	<u>Age</u>	<u>Rank</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Entrance Fee: **Team Kata \$45 per team\$20 each individual for team event (Cash ONLY at the door) **NO Refunds, No Exceptions**

I, the undersigned, do hereby voluntarily submit my application for attendance and participation in the CCIKA 3rd Annual Winter Karate Championship, at the Alviso Youth Center, February 12, 2005. I do hereby assume full liability for any and all damages, injuries, or losses that I may sustain or incur, if any, while attending or participating. I do hereby waive all claims against the promoters, operators, sponsors and officials of the City of San Jose, for any injuries that I may sustain. I fully understand that any medical treatment given me will be of first-aid type only.

If under 18, this release form must be signed by a parent or guardian.

1. _____
2. _____
3. _____
Signature of Contestant _____ Signature of Parent or Guardian _____

** For pre-registration, please make checks or money orders payable to CCIKA and remit to:
12 S.First Street #820, San Jose, CA 95113

Must be received by 2/10/2005.
For more information call: Sensei James Carter at 408-971-4760.

