



**ENTRY FORM**

**Sunday 15th SEPTEMBER 2019**

<b>Name:</b>		<b>Age:</b>	
		<i>at time of competition:</i>	
<b>Address:</b>		<b>Phone:</b>	
<b>Suburb:</b>		<b>Region:</b>	
<b>Dojo:</b>		<b>Belt Colour:</b>	

**INDIVIDUAL EVENTS**

**KATA**

**KUMITE**

Up to 7yr incl	M & F
8 to 9 yr incl	Male
8 to 9 yr incl	Female
10 to 11 yr incl	Male
10 to 11 yr incl	Female
12 to 13 yr incl	Male
12 to 13 yr incl	Female
14 to 15 yrs incl	Male
14 to 15 yrs incl	Female
16 to 17 yr incl	Male
16 to 17 yr incl	Female
Jnr Open Black Belt (14 - 17 yrs)*	Male
18 to 34 yr incl (up to 1st kyu)	Male
18 to 34 yr incl (up to 1st kyu)	Female
Open Black Belt (18yrs+)*	Male
Open Black Belt (18yrs+)*	Female
35 to 44 yr incl	Male
35 to 44 yr incl	Female
45 to 54 yr incl	Male
45 to 54 yr incl	Female
55 yr +	Male
55 yr +	Female
Instructors	Male
Instructors	Female



**GRADE DIVISIONS**

<input type="checkbox"/>	8th - 7th kyu
<input type="checkbox"/>	6th - 4th kyu
<input type="checkbox"/>	3rd kyu & above

**OPEN DIVISIONS**

**TEAM EVENTS - TEAMS OF 3**

<input type="checkbox"/>	Junior Team Kata 8-4th Kyu (under 18 yrs)
<input type="checkbox"/>	Junior Team Kata 3rd Kyu+ (under 18 yrs)
<input type="checkbox"/>	Team Kata Male (18+ yrs)
<input type="checkbox"/>	Team Kata Female (18+ yrs)
<input type="checkbox"/>	Junior Team Kumite (14-17 yrs)
<input type="checkbox"/>	Senior Team Kumite (18 yrs+)

**TEAM KATA DETAILS -** List your Team Members here.

1.	_____
2.	_____
3.	_____

**TEAM KUMITE DETAILS -** List your Team Members here

1.	_____
2.	_____
3.	_____

\*14-17 yrs Black Belts MUST enter Junior Open Division.

\*\*18-34 yrs Black Belts MUST enter Open Division.

**TOURNAMENT DECLARATION**

1. I am aware that participation in martial arts, including non-contact GKR Karate tournaments, as with most sports contains a risk of injury.
2. In consideration of my acceptance in the competition, I agree that GKR Karate, its servants and agents and all persons involved in the organisation of the tournament shall be excluded from liability for loss and damage to the fullest extent permitted by law. I accept that this includes exclusion of liability or consequential loss or loss of profits arising from my participation in the tournament.
3. Photography and filming. GKR Karate permits the photography and filming of competitors in tournaments. It is a condition for acceptance in the competition that the competitor consents to the occurrence of such photography and filming

Signature: \_\_\_\_\_ Parents signature: \_\_\_\_\_  
(if under 18 years of age)

**Protective Equipment is Compulsory for Kumite**  
 Gloves (GKF/WKF approved only), Shin Protectors & Mouth Guards must be worn by all competitors. Groin Guards for all male competitors are compulsory. Chest Guards are compulsory for all female competitors from 12 yrs+

Please ensure that you have ticked only the boxes relevant to your events and that all of your information is filled out correctly

**ENTRY FEES: \$35 FIRST EVENT  
\$10 EACH SUBSEQUENT EVENT**

**Fee Paid:** \_\_\_\_\_

**Sensei Sign:** \_\_\_\_\_

**Sensei Name:** \_\_\_\_\_



Please tick YES or NO to the following questions and statements.  
(If the answer is YES to any of these questions, please give details)

Do you have any allergies? E.g. aspirin, antibiotics, foods?  YES  NO

Are you taking any form of medication at present?  YES  NO

if yes, please give details:

---

---

### DOCTORS DETAILS:

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### EMERGENCY CONTACT DETAILS:

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Other No: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Other No: \_\_\_\_\_

### DECLARATION (Delete as applicable)

I/my son / daughter is capable of taking part in the GKR Karate Tournament. I am willing to allow myson/daughter to participate in the above activity and confirm that they will be attending the tournament with/without a parent/guardian/ a nominated person who has agreed to supervise my child. In the event of illness or injury, I agree to authorise members of staff attending/participating in the event to consent on my behalf for an anaesthetic to be administered or any other urgent medical treatment to be given on the advice of a qualified medical practitioner/qualified first-aid officer.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

PLEASE CHARGE MY CARD  VISA  MASTERCARD

/    
Credit Card Number Expiry Date CV

Name on Card:  Signature:  Amount: \$



**GKR**KARATE  
KARATE FOR EVERYONE

## STATE TITLES ENTRY FORM

**Date: SUNDAY 15TH SEPTEMBER 2019**

**Venue: GLORIA PYKE NETBALL & SPORTS COMPLEX**

**Greaves Reserve (off Bennett Street) Dandenong**

**Time: Competitor Arrival 8.30am**

**Time: Tournament Commences 9.30am**

**Competitor Entry Fees: \$35 first event**

\$10 each subsequent event

**Spectators: Adults \$10, Child \$5, Family \$20 (3 of more)**

**Closing date of entries: Sunday 8TH SEPTEMBER 2019**

**NO ENTRIES WILL BE ACCEPTED ON THE DAY**

All fees are strictly non refundable

**Competitors Safety Equipment Is Compulsory For Kumite**

Gloves (IGKR/WKF approved only). Either red or blue is acceptable except in Open divisions where competitors will require both colours

Shin Protectors and Mouth Guards must be worn by all competitors  
Groin Guards for all male competitors are compulsory. Chest Guards are compulsory for all female competitors from 12 yrs+