

2024 WINTER OPEN KARATE CHAMPIONSHIPS

Koko Head District Gym 423 Kaumakani St. – Honolulu, HI 96825 Sunday, February 4, 2024 (9:00am to 4:00pm)

NAME	AGE M/F	BIRTHDATE
First (Print) La	ast	
ADDRESS	PHONE#_	WEIGHT
KARATE SCHOOL	INSTRUCTOR	BELT RANK
	KUMITE DIVISION	
	())(())	DANY
() FEMALE – 5 yrs. & under	() MALE – 5 yrs. & under	
() FEMALE -6 yrs.	() MALE -6 yrs.	() White
() FEMALE -7 yrs.	() MALE – 7 yrs.	() Yellow
() $FEMALE - 8$ yrs.	() MALE -8 yrs.	() 10th Kyu
() $FEMALE - 9$ yrs.	() MALE – 9 yrs.	() 9th – 8th Kyu
() FEMALE – 10 yrs.	() MALE – 10 yrs.	() 7th – 6th Kyu
() FEMALE – 11 yrs.	() MALE – 11 yrs.	() 5th – 4th Kyu
() $FEMALE - 12 yrs$.	() MALE – 12 yrs.	() 3rd – 1st Kyu
() FEMALE – 13 yrs.	() MALE – 13 yrs.	() Black
() FEMALE – 14 yrs.	() MALE – 14 yrs.	
() FEMALE – 15 to 17 yrs.	() MALE -15 to 17 yrs.	
() FEMALE – 18 yrs. & above	() MALE – 18 yrs. & above	ve
*Please Note: If divisions are too sn	nall, tournament administratio	n may combine age/rank groups.
RI	EGISTRATION FEE: \$20.00	
RELEASE: I, the undersigned, do hereby volunta Championships at the Koko Head District Gym, or all damages, injuries, illnesses or losses that I may claims against the promoters, operators or sponsor injuries that I may sustain. I fully understand any IF UNDER 18 YRS., THIS RELEASE	n Sunday, February 4, 2024, and do sustain or incur, if any, while attend s, officials, Koko Head District Gyn medical treatment given me will be	hereby assume full responsibility for any and ding or participating and I hereby waive all n, and the City and County of Honolulu for any of a first aid type only.
SIGNATURE OR CONTESTA	NT SIGNATURE O	F PARENT OR GUARDIAN

All applications must be turned in by <u>Saturday</u>, <u>January 27, 2024</u>. No late forms will be accepted after this date or on tournament day. Entry forms may be mailed to 7231 Nuulolo St., Honolulu, HI 96825 or given to an IKF instructor. For more information, please call: (808) 221-4928. Please make checks payable to <u>IKF</u>.