



Deadline:
Postmark May 20th

Mail registration form and check for \$15.00: Payable to "Kumite Classic" 12421 St. Nikolai Dr. North Huntingdon, PA 15642 (Registration fee includes expo admission for the contestant and +1 parent).

Contestant Information: First Name: _____ Last Name: _____

[MALE] or [FEMALE] AGE: _____ Birth date: _____ Favorite Team: _____

AGE GROUP

[3 months-1 year] [1-2 years] [2-3 years] [3-4 years pre-school] [5-6 years kindergarten]

How did you hear about the event: _____

If you have a referral, please indicate: List: _____

Parents Info: First Name: _____ Last Name: _____

Are Code: _____ Phone: _____ First Kumite Classic Before? [Y] [N]

Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____

LIL' SPORTS WAIVER

Please include a brief bio of your child



Bring a copy of this form with you to the expo

I, (print name) Parent or Guardian

_____,
the undersigned hereby release Kumite Classic Entertainment Corp., and any and all other persons associated with this event in any capacity, from any and all liability due to injuries that I may incur as a result of my attendance and / or participation at this event. Furthermore, I hereby waive any compensation whatsoever for the use of pictures or video production of myself, utilized by those associated with this event, for any promotional use or profit-making at anytime. I agree to indemnify, defend and hold harmless all the above named parties from any liability or compensation. Additionally, I am fully aware of my personal medical condition and hereby certify that I am mentally and physically fit perform at the Kumite Classic. I understand that a parent or guardian must supervise the contestant at all times.

Signature of parent / guardian who assumes complete responsibility (if under the age of 18)

Date