

# REGISTRATION FORM

Name \_\_\_\_\_ Age \_\_\_\_\_ Rank \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_ Instructor / School \_\_\_\_\_

I wish to enter the following events:

## **FIGHTING**

4&under  
 5yo  
 6-7 novice  
 6-7 advanced  
 8-9 novice  
 8-9 advanced  
 10-11 novice  
 10-11 advanced  
 12-13 novice  
 12-13 advanced

## **FORMS**

4&under  
 5yo  
 6-7 novice  
 6-7 advanced  
 8-9 novice  
 8-9 advanced  
 10-11 novice  
 10-11 advanced  
 12-13 novice  
 12-13 advanced

## **OPEN**

4&under  
 5yo  
 6-7 novice  
 6-7 advanced  
 8-9 novice  
 8-9 advanced  
 10-11 novice  
 10-11 advanced  
 12-13 novice  
 12-13 advanced

## **KUMITE**

7&under           \* novice for 6-7 year olds is under yellow belt  
 8-9               \*\* novice for other divisions is under 3 orange stripes  
 10-12           \*\*\* advanced is 3 orange stripes and above

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**ENTRY FEE:** *If pre-registered one week before the tournament, the cost is \$20 for one or more events (non-refundable); \$25 the day of the tournament. Cash or check payable to Duane Lucia*

I the undersigned, hereby release Duane Lucia, Sanchin Martial Arts, Hill House Inc. and all persons associated with this event in any capacity, from any liability due to injuries, etc., that I may incur as a result of my attendance and/or participation at the above specified event. Furthermore, I hereby waive any compensation whatsoever for the use of pictures, movies, media coverage, etc. utilized by those associated with this event at any time.

Signature of parent or guardian \_\_\_\_\_

Signature of competitor \_\_\_\_\_

Send completed registration to: **DUANE LUCIA**  
**150 STANIFORD STREET, SUITE 509**  
**BOSTON, MA 02114**

FOR MORE INFORMATION ABOUT SANCHIN MARTIAL ARTS  
CLASSES IN BOSTON CALL:

**(617) 416-0718**  
**sanchinclub.com**