

# Mid-America ISKF



### **Regional Training Registration Form**

## **Collegiate Student**

Student must have a valid college identification card

Name:		Club Affiliation:		
College / University:				
Current Rank:	MA/ISKF#		Expiration Date:	
Email Address:				

All Pre-Registration forms must be received by Regional Headquarters one week prior to the event.

<b>Collegiate Registration</b>	Cost	Total Paid	Payment made by:
1 Training Session	\$20.00		Check:       \$       #         Cash:       \$       #         PayPal:       \$       #         Club Scholarship:       \$       #
ISKF Membership (If not current)	\$50.00		
Other			
Sub-Total			MAK Scholarship:  \$
Other Deductions (Scholarship Fund)		-	
Total Enclosed			

#### SEND COMPLETED REGISTRATION FORMS AND PAYMENT TO:

Mid-America Karate, Inc. • 1020 Nottingham Drive • Cincinnati, Ohio 45255 Email: kweber@MidAmericaISKF.com Phone: 513-233-3656

#### Release Form

The undersigned, in consideration of being permitted to participate in Shotokan Karate training, competition, and/or testing, hereby waives and releases the International Shotokan Karate Federation (ISKF) and its successors, Mid-America Karate, Inc., its members, instructors, affiliates, and facility providers from any liability for damages due to the loss or damage to property, personal injury, or death which may occur at such facility for said purpose. The undersigned represents that he/she is fully aware of the risks of such participation, has no health conditions presenting any increased risk, and has adequate insurance coverage in force to cover any such loss or damage. This release is binding upon the undersigned and his/her heirs, executors and administrators. Additionally, Mid-America Karate, Inc. has my permission to use photographs and/or videos of myself in Mid-America Karate, Inc. and ISKF promotional material and on social media.