

Mid-America ISKF Regional Training Registration Form



Name: _		_ Clul	b Affiliat	tion:					
Age:	Current Rank: MA/			ISKF#		Expiration Date:			
Email A	ddress:								
All Pre-	Registration forms must	be received	d by F	Regional	Headqua	arters one we	ek pric	or to the	event
Individual Registration		Cost	Total	Paid	Payment made by:				
1 Traini	ing Session	\$40.00			Check:			#	
ISKF M	lembership (If not current)	\$50.00			Cash: PayPal:				
Other					Club Scho	olarship: 🛄 🖺			
Sub-Total					MAK Sch	10larship:🗌 🖺			mon)
Early Registration* & Other Deductions			-		Early Keg	gistration:\$			SOIL
Total Enclosed								dditional ly Member	rs
* Available to current ISKF members only Payment must be received with the Registration form to qualify						Name/Age:			
Additio	onal Family Registration		tional son	Number of People		ISKF #			
1 Traini	ing Sessions	\$40.0	00 ea.			Name/Age:			
ISKF Membership (If not current) \$50.0)0 ea.			Rank:				
Family Sub-Total						ISKF #			
Early Registration* & Other Deductions					-				
Total Family Members Fees Enclosed						Name/Age:			
Total including Individual Registrant						Rank:			
						ISKF #			
	SEND COMPLE	ΓE <u>D</u> REGIS	TRAT	ION FORI	MS AND	PAYMENT TC):		
	Mid-America Karat								

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.

Youth Participant(s) Date of Birth Signature of Participant or Parent/Guardian for those 17 & younger

Email: kweber@MidAmericaISKF.com

Phone: 513-233-3656