

**Sanshou Competition Pre-Registration**  
Please PRINT clearly the following information

Full Name: \_\_\_\_\_ Gender: \_\_\_\_\_ D.O.B: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City, State, Zip, Country: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Club/School: \_\_\_\_\_ Instructor: \_\_\_\_\_  
Phone #'s Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Fax: \_\_\_\_\_

**Check Off Division/Class Category (Includes After Fight Dinner):**

\_\_\_\_ Adult \_\_\_\_\_ Youth  
\_\_\_\_ Division A+: \$100.00 = \$ \_\_\_\_\_ U.S.  
\_\_\_\_ Division A: \$ 90.00= \$ \_\_\_\_\_ U.S.  
\_\_\_\_ Division B: \$ 80.00= \$ \_\_\_\_\_ U.S.  
\_\_\_\_ Division C: \$ 70.00= \$ \_\_\_\_\_ U.S.

**Pre-Registration Closes on November 1, 2014!!**

\_\_\_\_ Adult \_\_\_\_\_ Youth \_\_\_\_\_ Kids  
\_\_\_\_ Sparring - Continuous Light Contact: \$35.00 per contest

\*Please see Weight/Class Division Chart to list your appropriate Weight/Age Class: \_\_\_\_\_ \*

Chaperon Ticket(s): \_\_\_\_\_ x \$10.00 = \$ \_\_\_\_\_ U.S.  
Spectator Ticket(s): \$ \_\_\_\_\_ x # of Tickets= \$ \_\_\_\_\_ U.S.

All Late Registrations Add (\$10.00): \_\_\_\_\_ All On Site Registrations Add (\$15.00): \_\_\_\_\_

**Enter Total Amount Due: \$ \_\_\_\_\_ U.S.**

**Statement of Waiver & Release of Liability**

I, the undersigned, knowingly and without duress, do voluntarily submit this form to the said Shaolin Institute; Shaolin Chan Foundation-US Open Challenge and; Shaolin Interscholar Competition organization committee and related organizations and affiliates (hereafter organization committee and affiliates). I do hereby assume all risk of personal, physical, or mental disabilities, injuries or losses, which may result from participating in the said US Open Challenge and Shaolin Interscholar Competition and acting for myself, my heirs, personal representatives, and assignees, I hereby release the said organization committee and affiliates, their officers, agents, representatives, servants, employees, and all other related members from all claims actions, suits, controversies and claims at law or in equity by stand that there is a risk in all activities, and I assume full responsibility for my actions, during and in connection with said organization committee and affiliates. I fully understand that any medical treatment given to me will be of the first aid type only, and I consent to such emergency treatment if deemed necessary. I further consent that any photos furnished by me, or any photos/videos taken of me in connection with the organization committee and affiliates can be used for publicity or television and I waive all compensation in regards thereto. By signing your name and date below you indicate that you consent to the Statement of Waiver and Release of Liability above and that you are at least 18 years of age. If you are under 18 years of age, a parent must sign in lieu of the minor.

Signature of Participant or Legal Guardian of Participant: \_\_\_\_\_  
Date: \_\_\_\_\_

**Please Send Your Payment To:**

Shaolin Institute  
704 Lakeside Dr.  
Mobile, AL 36693  
Payments by Credit/Debit Card:  
251-662-3225 or 770-286-9808

**Note:** All the events are open to both men and women. His/her parents must sign for youth who participate in light sparring. No events have any age limitation except for Sanda/Sanshou/MMA. If the said division does not have 5 participants, we reserve the rights to group up with another division and during a different time slot.