



THE5th I.K.O.MATSUSHIMA WORLD OPEN KYOKUSHIN KARATE TOURNAMENT

Male

26th,27th Nov.2016

Photograph (3)

COMPETITORS CODE OF ETHICS:Should my entry into this event be accepted I hereby declare that I will,at all times compete to the best of my ability;obey the rules of the tournament;obey the referee;display good sportsmanship and courtesy.

Passport size
face look
4 × 3cm

The order of priority (Branch Chief use)	Country	Name of Branch Chief	Signature of Branch Chief	Please write name in the back
First name	Family Name			
Pronunciation of name				
Date of Birth	Age	Current Grade(Dan or Kyu) (Please send a copy of Dan certificate)		
Occupation				
Address		Experience of Tournament		
E-Mail				
Height(cm)	Weight (Kg)			
How many years of training		Praize(1st,2nd,3rd)		
Notice; Fighter have to wear Groin guard				

Note:

1. Please send Application forms,three photos,copy of Dan certificate,Doctor certificate to Japan Honbu within 31st August 2016.
- 2.If these documents will not reach till deadline,they might not attend at the tournament
- 3.Fighters have to bring and wear groin guard.
- 4.When the fighters will be over or luck the capacity,the tournament organizer select them by numbers of membership cards
- 5.Fighters are free of Pick up bus,Sayonara party and spectator tickets.

DECLARATION

Note: for the purposes of this declaration the words I.K.O.MATSUSHIMA International Karate Organization Kyokushin-Kaikan will signify all branches,sub-branches or members.

1. I the undersigned on consideration of,and as a condition of acceptance of my entry in the above event,for my self,my heirs, executors and administrators,hereby waive all and any claims fight of cause of action,which I or they might otherwise have arising out of any loss of life or injury,damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequent upon my entry in the said event. **Organizer can not guarantee any fee for injury,damage or loss of life.**
2. This waiver,release and discharge shall be and operates separately in favour of all persons,corporations,and bodies involved or otherwise engaged in promoting or staging the event.

3.MEDICAL DECLARATION

By signing this application the applicant hereby assumes full and total responsibility for his safety and personal possessions and the applicant releases the tournament organisers,agents,sponsors and other competitors from any liability,for any injury or personal loss of any kind whatsoever. The applicant acknowledges that he understands the risks associated with competing in this kind of tournament,and that first aid only is provided.

4. **A DOCTOR CERTIFICATE** stating that the application is fit to participate in a full-contact karate tournament,and that the applicant does not have any person to person transferable infection or diseases(**HIV,Hepatitis B& C**),must accompany the application:

Name

Dated

2016

Signature of applicant and declaration: