Tatsu Do 20th Annual Invitational Tournament

April 23-24, 2010

Please enter me into the Annual Tatsu Do Invitational Tournament
to be held at the Livonia High school. Livonia, NY on April 23-24th, 2010.

Name:_____ Rank:_____
Last First

Address: _____
Street City State Zip

Phone: _____ Date of Birth: _____ Age: _____ Weight: _____

Style/System:_____ Instructor:_____

School Name: _____School Phone:(___)_____

I, the undersigned, do hereby Voluntarily submit my application for participation in the Annual Tatsu Do Invitational Tournament scheduled on the above date and place and do hereby assume full responsibility for any or all damages, injuries or losses. that I may incur while attending or participating in the aforementioned event and hereby waive any or all claims against the promoters, operators and/or persons of said event, their employees and agents, individually or otherwise. for any claims for damages, injuries or losses that I may sustain. I further hold harmless the above mentioned and specifically covenant not to bring suit to the individuals or organizations mentioned above, and upon which they have relied in accepting the above, and upon which they have relied in accepting the above application.

I fully understand that any treatment provided to me as a response to any possible injury, will be of first aid type only.

My signature on this application is a knowing representation that I have fully read, understand and agree to the terms and conditions contained herein and upon which I intend the promoters to rely.

_____ _____
Applicants Signature Parent/Guardian if under 21

_____
Date