



***ONI KEN KARATE***  
***2nd ANNUAL***  
***BATTLE OF THE***  
***GILA***  
***TOURNAMENT***

***Date: February***

***23, 2019***

***Time: Registration***

***starts at 8:00am***

***Competition begins***

***at 10:00am***

***Location: Grant***

***County Convention***

***Center***

***3031 US 180***

***Silver City,***

***NM 88061***



**ONI KEN**



**KARATE**



# 2019 Battle of the Gila

USAMA 2 star Tournament

Hosted by Oni Ken Karate LLC

Mailing address: 4221 Blackhawk Rd, Silver City NM, 88061

February 23, Silver City, NM

Grant County Veterans Memorial Business & Conference Center

3031 Highway 180 East

## Entry Form

\$40.00 for 1 or 2 events, \$5.00 for each additional event (5 and under are free)

Spectators Prices- \$5.00

NAME \_\_\_\_\_ Competitor's AGE on Tournament Date \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Circle

TIME IN MARTIAL ARTS \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS SEX M / F PHONE \_\_\_\_\_

USAMA MEMBER # \_\_\_\_\_ BELT RANK (Dan Level, if applicable): \_\_\_\_\_

SCHOOL \_\_\_\_\_ INSTRUCTOR \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

Please Register me for the following Competitor Events: \$40.00 1 or 2 events. Extra \$5.00 per each additional event.

\_\_\_\_\_ Forms (Kata) \_\_\_\_\_ Sparring (Kumite) \_\_\_\_\_ Weapons (Kobudo)

\_\_\_\_\_ Chanbara (Kombat Kenjutsu) \_\_\_\_\_ TDS (Take Down Sparring)

Number of Competitor Events: \_\_\_\_\_ - Total for Competitor Events: \$ \_\_\_\_\_

I understand that karate is a contact sport. I am aware that I am participating in an activity which involves physical contact and injuries may occur which may potentially involve bodily harm or even death and do so at my own risk. I waive any claim or cause of action I may have against the promoters of the tournament, Trent Petty, Chad Petty, Oni Ken Karate LLC, the judges, other competitors, and the U.S. Association of Martial Artists Inc., that may arise out of my participation in this tournament. I further agree to indemnify and hold harmless the promoter, Trent Petty, Oni Ken Karate LLC, the judges, and the U.S. Association of Martial Artists Inc., for any injuries or damages which may arise due to my participation in the tournament. I state that I do not suffer from any physical and/or mental conditions which may affect my participation in this tournament. I further agree to conduct myself in a sportsmanlike and safe manner and understand if I fail to do so, I may be disqualified from the tournament and not entitled to a refund. I also hereby give permission to medical personnel to administer First Aid or Emergency Treatment if, in their opinion, it becomes necessary.

Competitor's Signature\* \_\_\_\_\_ Date \_\_\_\_\_

\* (Parent or guardian must sign if under 18)

Fee for Competitor Events Entered ..... Total: \$ \_\_\_\_\_

Number of Spectator Tickets \_\_\_\_\_ \$5.00 each ..... Total: \$ \_\_\_\_\_

Payment Enclosed ..... Total: \$ \_\_\_\_\_