

MALTA KARATE OPEN 2012

Saturday, 10th March 2012 APPLICATION FORM

Club Name : _____ Style _____

Contact Name: _____ Tel: _____

Email : _____

Full Address _____

COUNTRY (CAPITAL LETTERS) :

Association _____

I confirm that all the competitors entered on this sheet have received my advice of and accept the following statement:

"The competitor realises and discharges the organisers and their representatives or agents and all other competitors from all claims that the competitor or his personal representative may have for any injury (however caused) sustained by the competitor and for the loss or damage (however caused) to his personal belongings suffered at any time during the course of the championships or while on the premises at which the championships are being held"

Signed _____ **Name (Block)** _____

Competitor's Name	Sex MF	Date of Birth	Grade	From Category List please mark your category number				Amount

Please photo copy for extra sheets **Eur20 per individual category**

TEAM KATA/ KUMITE

Eur35.00 per team

Competitors Name	Sex M/F	Category number	Amount
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1

2

3

1

2

3

1

2

3

1

2

3

Please photo copy for extra sheets

PAIR KATA

Eur30.00 per pair

Competitors	Sex	Category number	Amount
Name	M/F		
1		_____	
2			
			<input type="text"/>
1		_____	
2			
			<input type="text"/>
1		_____	
2			
			<input type="text"/>
1		_____	
2			
			<input type="text"/>
1		_____	
2			
			<input type="text"/>

Referees / Officials

Names :

1

2

3

4

5

6

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