

SINGAPORE FULL CONTACT KARATE CHAMPIONSHIP 2017

OFFICIAL COMPETITOR ENTRY FORM



Please affix your
most recent
Passport Size
Photo here

Participation Fees: S\$50 / Entry

(Not refundable on cancellation)

1. CATEGORIES		
A. Men's Open Weight	<input type="checkbox"/>	B. Women's Open Weight <input type="checkbox"/>
2. PARTICIPANT'S PARTICULARS		
Name (Underline Surname):		Date of Birth: (dd/mm/yy)
Sex: Male / Female	Height (cm):	Weight (kg)
Organization / Dojo Name:		
NRIC / FIN / Passport No:		Nationality:
Contact Numbers (Mobile):	(Home):	(Office):
Mailing Address:		
Email Address:		
3. EMERGENCY CONTACT		
Name (Underline Surname):		Relationship:
Contact Numbers: (Mobile):	(Home):	(Office):
4. FOR OFFICIAL USE		
Date Received:	Remarks:	

*DECLARATION

Competitors must be 18 years of age on / before tournament date

1. I acknowledge and agree that I have read, understood and accepted the rules and regulations applicable to the event.
2. I declare that I take part in this tournament with full knowledge of the consequences which may arise during or from the event and do hereby for myself, my executors, administrator and assignees covenant with the organisers to waive, release, discharge them from any claims, demand, proceeding, cost, expense, liability I may have against them in the event of loss, injury, fatal or otherwise that I may suffer as a result of my participation. I declare to the best of my knowledge that I am physically fit to meet the challenges which the competition demands.
3. I declare my personal particulars disclosed herein are true and correct.

Signature of Participant

Date