

REGISTRATION FORM

C o p a S a s k

Saskatchewan Cup of Brazilian Jiu Jitsu and Submission Wrestling

NAME: ADDRESS: PROV: POSTAL CODE: PHONE: DATE OF BIRTH: EMAIL: TEAM/COACH: EMERGENCY CONTACT: PHONE:

Brazilian Jiu Jitsu No Gi Both

Please check a belt level:

White Blue Purple Brown/Black

No Gi: (please check one)

Beginner (less than two years experience) Advanced (more than two years experience)

WEIGHT CLASS - MEN

- Rooster (140.0 - below) Feather: (140- 154.0) Light: (155 - 170.0) Middle: (171 - 185.0) Cruiser: (186 - 204.0) Heavy: (205 - over)

WEIGHT CLASS - WOMEN

- 115-Below 116-130 131-155 156 - Above

AGE DIVISION

- Juvenile (Under 17) Adult (18 - 34) Master (35 - Older)

TOURNAMENT RELEASE AND WAIVER

I, the undersigned attest that I am over eighteen years of age, and hereby waive all claims whether in tort or in contract that may arise from my participation in the aforementioned tournament. I understand the rules of the tournament and will abide by them. I understand that I am participating in a sport that has body contact. I assume full responsibility for all of my actions during and connected to the above tournament. I understand the risks of the competing in this form of Martial Arts competition and hereby release Anthony Scales, Complete Martial Arts and Fitness Inc., O'Neil High School, and it's officers, employees, instructors, directors, agents, referees, timekeepers, coaches, associates and the event facility, from any and all type of injury, loss, or death sustained while competing in this competition. I, undersigned, also state that I am in good physical condition and know of no reason why I cannot participate in this Martial Arts event. I attest that I have current and valid health insurance. Divisions and weight classes are subject to change without notice. In the event of a medical emergency, I hereby authorize any licensed medical personnel to perform any accepted medical procedure deemed necessary and I agree to bear the expense of any such treatment. I also agree that my attendance and/or performance at the tournament may be photographed, filmed, or videotaped and used by the event organizers and I waive any compensation thereto and to any future rights for the promoters to use these films, photographs or other likeness of me. I, the undersigned, have read the rules and the release above and agree to all of its terms and sign below to complete this form.

SIGNED: PRINT NAME:

DATE:

SIGNATURE OF PARENT/ GUARDIAN IF PARTICIPANT IS UNDER 18 years of age
