

**KICK North Region Qualifier May 6, 2017  
National – State –Region 1**

**Farnell Middle School  
13912 Nine Eagles, Tampa, FL 33626**

**Registration Opens 7:30 am**

**8:30 am – Report Time**

XMA Weapons & Forms, Open Weapons, 5 & under & 6/7 Divisions

**9:00 am – Competition Start Time**

XMA Weapons & Forms, Open Weapons, 5 & under & 6/7 Divisions

**10:30 am – Report Time**

12/13 & 14-17 Traditional & Sparring Divisions

**11:00 am – Competition Start Time**

12/13 & 14-17 Traditional & Sparring Divisions

**12:30 pm – Report Time**

All 8/9 & 10/11, Traditional & Sparring Divisions

**1:00 pm – Competition Start Time**

All 8/9 & 10/11 Traditional & Sparring Divisions

Black Belt Weapons & Forms Grand Championship take place after 3<sup>rd</sup> Session,  
Fighting Grand Championship will happen at the end of each session

**Event Location**

**Farnell Middle School**

**13912 Nine Eagles**

**Tampa, FL 33626**

**Contact:**

**Jc or Lissie Maldonado**

**813598-0945**



**KICK North Region Qualifier**  
**Level 2 – National, State & Region 1**  
**May 6 Tampa**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Day # \_\_\_\_\_ Eve# \_\_\_\_\_ Fax# \_\_\_\_\_ Email \_\_\_\_\_  
 Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Highest Rank \_\_\_\_\_  
 School Name \_\_\_\_\_ Instructor \_\_\_\_\_ Yrs Training \_\_\_\_\_  
 School Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 School Phone \_\_\_\_\_ School Fax# \_\_\_\_\_ Email \_\_\_\_\_

**Experience Level**

- Karate Experience
- Beginner (Under a year experience)
- Intermediate (1 – 2 years experience)
- Advanced (Over 2 years experience)
- Black Belt

You must compete in the highest level achieved regardless of current style or rank. You may only compete in Beginner or intermediate level 1 year. Advanced may stay for 2 seasons

**Please check the events you want to enter**

**KICK Only** Entry Fee includes 1 Division, you may add extra divisions. No refunds for Missed Divisions

- |   |                                      |  |
|---|--------------------------------------|--|
| <u>Weapons</u>                          | <u>Forms</u>                         | <u>Point Fighting</u>                        |
| <input type="checkbox"/> XMA            | <input type="checkbox"/> XMA         | <input type="checkbox"/> Point Fighting      |
| <input type="checkbox"/> Traditional    | <input type="checkbox"/> Traditional | <input type="checkbox"/> Continuous Sparring |
| <input type="checkbox"/> Open Weapons   |                                      |  |
| <input type="checkbox"/> Board Breaking |                                      |  |

**Send pre-registration to: KICK USA**  
 c/o TNC TKD  
 7071 W. Waters Ave, Tampa, Fl 33624  
 Call 813-598-0945 info@kickusa.com  
 Register on-line today at www.kickusa.com

**Early Registration Deadline is April 28**

<b>Entry Fee by 4/28:</b>	<b>\$35</b>
<b>Late registration:</b>	<b>\$45</b>

Spectators pay \$10 at the door only

**Release & Waiver, Please read & Sign**

I hereby, waive forego, dismiss any & all rights & claims which I have against KICK/USA AKA Kids In Competition Karate Inc., it's officers, directors, employees, instructors, volunteers, tournament hosts, officials, spectators or other competitors from any injuries incurred or aggravated previously existing conditions while participating in any KICK/USA Inc., tournament, seminar, class, camp or event of any type hosted by or bearing the KICK/USA Inc. logo or trademark. I understand that this or any martial arts event is a contact sport and will involve physical contact and could result in serious injury or death to participants. In addition, I hereby grant full permission to any all of the foregoing to use any photographs, videotapes, motion pictures, recordings or any record of this event for any purpose.

I have fully read and understand this release & waiver and I am the legal parent or guardian of:

\_\_\_\_\_

I give my permission for the above-mentioned person to participate in this or any KICK/USA event.

Signature of legal Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_  
 This waiver must be signed for the above named participant to participate

**2017 KICK Membership**  
**KICK Membership includes point rankings, Passbook**  
 \$15 \_\_\_\_\_

**Entry Fees**

**KICK Entry Fee by 4/28 \$35 \_\_\_\_\_**  
**Late or at door Entry Fee \$45 \_\_\_\_\_**

**Extra KICK Divisions**

Extra Divisions # \_\_\_\_\_ Divisions x \_\_\_\_\_ \$10 = \_\_\_\_\_  
 Late or At Door Extra Divisions # \_\_\_\_\_ Divisions x \_\_\_\_\_ \$15 = \_\_\_\_\_

**Total to Send \_\_\_\_\_**

**\*no refunds for missed divisions or events**

**The age & rank you will be on 2/28/2017 is the age & experience group you must compete in for the season.**