21st Annual Unity Championship

Saturday, December 12, 2015

Make your payment payable to IMA and mail it with your registration form to: 1340 Main St., Louisville, CO, 80027 (or hand it to your instructor)

Registration deadline is December 8, 2015 (Add a \$15 late fee if submitting after the deadline)

No refunds or credits will be given

Individual Registration Form

_____ 1 Event \$40.00

Div. # _____ Kata

Div. #	Kumite	2 Event	ts \$45.00
<u>DO 1</u>	NOT USE THIS FOR	RM FOR TEAM REGISTE	RATION
First Name:		_ Last Name:	
Age: Sex: M	F Karate Rank: _	Years of training:	Dojo:
Address:		City: _	
Zip Code:	Telephone #:	E-mail:	
relieves, releases at firm, corporation o	nd discharges the Internat r association from all liab	nd instruction, the undersigned he tional Martialarts Association (I.N pility or claims of whatever nature on, training or instruction.	M.A.) and any person,
Signature of Co.	mpetitor (If unc	der 18) Signature of Parent/Guardian	 Date

If you are also entering Team Kata and/or Team Kumite you need to fill out a separate team registration form(s) with your team members' names and attached fees