



International Modern Martial Arts Federation Conference Championships  
November 5,6,7, 2010

## REGISTRATION FORM

**Please type or print clearly - information with an \* is required**

School Name: \_\_\_\_\_

Sifu/ Sensei: \_\_\_\_\_

School Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov./State \_\_\_\_\_ Postal / Zip \_\_\_\_\_

School # (\_\_\_\_) \_\_\_\_\_ School email: \_\_\_\_\_ Organization: \_\_\_\_\_

\*Name: \_\_\_\_\_ \*Birth date: (mm) / (dd) / (yyyy) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*Address: \_\_\_\_\_ \*City: \_\_\_\_\_ \*Prov / Sta: \_\_\_\_\_ \*Postal / Zip \_\_\_\_\_ \*Height: \_\_\_\_\_

\*Weight: \_\_\_\_\_ \* Male / Female Phone # (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Style: \_\_\_\_\_ \*Rank: \_\_\_\_\_ \*Level: ( Beg ) ( Inter ) ( Adv.)



*"Toonies for Treise" Donations Accepted*

**Please read waiver before signing**

I, \_\_\_\_\_ the undersigned, knowingly, without duress, do voluntarily submit my entry into the **International Modern Martial Arts Federation Championships**, sponsored by IMMAF CANADA. I assume all risks of personal, physical and mental disabilities, injuries, death or losses, which may result from participating in this tournament. Acting for my self, my heirs, personal representatives, and assignees, I do hereby release the **International Modern Martial Arts Federation Championships**, IMMAF CANADA, its officials, agents, representatives, employees, and all other related members from liability due to any injuries or death incurred and any resulting legal claims, actions, suits, or controversies. I also understand that there is great risk of injury or even death in the competition divisions, particularly in fighting or sparring in light or full contact events and I assume all responsibilities for all of my actions, activities or omissions during and in connection with the tournament. I fully understand that any medical treatment given to me will be the first aid type only. I have read, understood and agree to abide by the rules of this event, and accept all responsibilities and associated liability for infringement of such rules. I am fully aware of my medical condition and hereby certify that I am mentally and physically fit to compete, I agree that my performance or attendance at the tournament, or both may be filmed, video taped or otherwise recorded or telecast live. I consent to the use by the "sponsor", its assignees and licensees of my name, likeness, voice, poses, pictures and biographical data concerning me fully or in parts and in any forms or languages with or without other material throughout the world without limitation, for television, radios, and or theatrical motion picture by any device now know or hereafter devised and I waive any compensation in regard thereof, as well as my future rights to the aforementioned.

**Parent or legal guardian signature required if participant is under (18) years of age**

**IMMAF reserves the right to refuse competitor entry or close a division due to lack of competitors.**

\_\_\_\_\_  
Signature of participant      Signature of legal Guardian (if under 18)      Date

**All early competitors forms must be in by Oct 15<sup>th</sup> 2010**

**\*Pre-registration Discounts\***

**For more information call: (519) 438 -5425**

**Send this form to:**

**IMMAF Canada**

**1444 Glenora Dr., London, Ontario, N5X 2H4**



**TOURNAMENT PRE-REGISTRATION OCT. 15<sup>TH</sup> 2010:**

\$40 dollar + HST for 1<sup>st</sup> event \$5 dollars each additional event

**DEMO TEAM ENTRY PRICE:**

\$10 Dollars per person ( max 5 people )

**AFTER PRE-REGISTRATION DATE:**

\$50 dollars for 1<sup>st</sup> event \$10 each additional event

	Day	IMMAF Members	Non Members
2 Day Conference ONLY T-shirt & Dinner included	Fri + Sat	\$149 + HST	\$159 + HST
2 Day Conference + Tournament & Dinner	Fri + Sat + Sun	\$179 + HST	\$189 + HST
Children's Conference T-shirt included (Dinner not included)	Saturday	\$59 + HST	\$69 + HST
Children's Conference T-shirt + Tournament (Dinner not included)	Sat + Sun	\$89 + HST	\$99 + HST
Tournament ONLY	Sunday	\$40 + HST Plus \$5 dollars each additional event	\$50 + HST Plus \$5 dollars each additional event
Dinner ONLY	Saturday	\$49 + HST	\$49 + HST
Demo Teams		\$10 per person (max 5 people)	

**Please Circle your choice(s) above**

Name of Cardholder	Credit Card Number & Expiration Date	Signature of Cardholder

**Please mail Check or Money order payable to: IMMAF CANADA**

**Send this form to:**

**IMMAF Canada**

**1444 Glenora Dr., London, Ontario, N5X 2H4**