

**Registration postmarked
after
July 1, 2017
will be charged a
\$20.00 late
Registration fee!!!**

**On July 2, 2017 the late registration
fee must be paid and marked on the
attached registration form. Late
registrations will not be honored if
the late fee is not paid. The
competitor will not be allowed to
compete.**

AJI 2017 Summer Classic Invitational

Saturday, July 22nd, 2017 Honolulu – Hawaii

Name: _____ Phone: (____) _____

Address: _____ Age: _____

City: _____ State: _____ Zip: _____

School or Organization: _____

Instructor: _____ email: _____

Washington Intermediate School

Address: 1633 S King St, Honolulu, HI 96826

Check in at 7:00 AM

Judges must have a certification from the AJI to Participate as a judge!

Contest Registration Forms for each event entered, must accompany this registration form and Waiver. All Waivers must be signed by parent, or guardian for any contestant under the age of 18 on July 22nd, 2017.

One Form Per Person Please!

Event	Cost	Amount
Karate Kata	\$25.00	
Weapons Kata	\$25.00	
Jujitsu Kata (Team = \$40.00) (Single = \$25.00)	\$40.00 or \$25.00	
Kumite	\$25.00	
Grappling	\$25.00	
Sport Jujitsu	\$25.00	
Summer Classics Youth T-Shirt <input type="checkbox"/> SM <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	\$12.00	
Summer Classics Adult T-Shirt <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> 2XL <input type="checkbox"/> 3X	\$18.00	
Camp Kokua & Team Awards Banquet Pagoda Hotel (07-23-17 6:30 PM)	\$60.00	
Awards Banquet – Under 12 years of age	\$35.00	
Late Fee if registering after July 1st, 2017! Registration will be returned if late fee is not included after July 1st!	\$20.00	

Make Checks Payable to: **AJI (Do not send cash!)**

Web Site: <http://www.campkokua.com>

email: decastro.mindy5@gmail.com - Tournament Director

Mindy DeCastro: (808) 386-9214

Total:

\$

Mail To: AJI ~ Mindy DeCastro ~ 82 Kaluhea St. ~ Wahiawa, Hi 96786

Waiver of Liability

I certify that I am medically and physically able to participate in this activity. I have been made aware of the potential hazards involved in jujitsu, karate and other self defense training and competition. Knowing the potential hazards involved and in consideration of my application being accepted, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, waive, release and discharge the American Jujitsu Institute, it's instructors, it's officers, the City and County of Honolulu, the State of Hawaii and anyone acting on their behalf, from any and all claims of liability for personal injury and, or death arising out of, or in the course of participating in this activity. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown.

Your Signature: _____ Date: ____ / ____ / ____
(Participants Signature if 18years or older - Only)

Print Your Name: _____
(Print participant's Name)

Note: If under 18 year of age, parental signature is required and noted below:

Print Name of Parent or Guardian: _____

Parent or Guardian's: _____ Date: ____ / ____ / ____
Signature