

CONTINUOUS SPARRING			
8 YEARS AND BELOW	MIXED	OPEN	CS01
9-11 YEARS	MIXED	10TH TO 6TH KYU	CS02
		5TH TO BLACK	CS03
12 - 14 YEARS	MIXED	10TH TO 6TH KYU	CS04
		5TH TO BLACK	CS05
15+ YEARS	FEMALE	10TH TO 6TH KYU	CS06
		5TH TO 1ST KYU	CS07
		BLACK	CS08
15+ YEARS	MALE	10TH TO 6TH KYU	CS09
		5TH TO 1ST KYU	CS10
		BLACK	CS11
40+ YEARS	FEMALE	10TH TO 6TH KYU	CS12
		5TH TO BLACK	CS13
40+ YEARS	MALE	10TH TO 6TH KYU	CS14
		5TH TO BLACK	CS15

SUMO WRESTLING. 14 YEARS AND UNDER			
UNDER 30 KGS	FEMALE	OPEN RANK	SW01
	MALE	OPEN RANK	SW02
30 - 37 KGS	FEMALE	OPEN RANK	SW03
	MALE	OPEN RANK	SW04
38-45 KGS	FEMALE	OPEN RANK	SW05
	MALE	OPEN RANK	SW06
46 - 53 KGS	FEMALE	OPEN RANK	SW07
	MALE	OPEN RANK	SW08
OVER 53 KGS	FEMALE	OPEN RANK	SW09
	MALE	OPEN RANK	SW10

SURNAME. _____

FIRST NAME _____

ADDRESS _____

SUBURB _____ STATE _____ POST CODE _____

GENDER. M ___ F ___ DATE OF BIRTH. ___ / ___ / ___ AGE _____ ***WEIGHT _____

EMAIL: _____ STYLE. LFP ___ NON LFP _____

PHONE _____ DOJO _____ DAY _____

RANK/KYU _____ EXPERIENCE: YEARS _____ MONTHS _____

	GROUP 1	SINGLE COMPETITOR	
	No. Of Events		Total Fee
1st Event	<input type="text"/>	@ \$35	<input type="text"/>
Additional	<input type="text"/>	@ \$10	<input type="text"/>
	GROUP 2	2 or More Competitors	
1st Event	<input type="text"/>	@ \$20 Each	<input type="text"/>
Additional	<input type="text"/>	@ \$10 Each	<input type="text"/>
	TOTAL FEES	DUE	<input type="text"/>

DECLARATION

1. I, the undersigned in consideration of, and a condition of acceptance of my entry in the above event for myself, my heirs, executors and administrators, hereby waive all and any claims fight of cause or action.,which I or they might otherwise have arisen out of any loss of life or injury, damage or loss of any description whatsoever which I may suffer in the course of or consequence upon my entry in the said event.

2. This waiver, release and discharge shall be and operates separately in favour of all persons, corporations, and bodies involved or otherwise engaged in promoting or staging the event.

3. I have read and understood the Loong Fu Pai rules and regulations. (Refer to www.lfp.com.au)

Signature _____ Date _____

Parents Signature _____ Date _____

(if Under 18 years of age)