



FEDERATION

OKINAWA SHORINRYU SHORINKAN SRI LANKA

OPEN KARATE CHAMPIONSHIP - 2015

Registration Form

01. Name with initials :-
Male Female

02. Address / Con. No :-

03. Date Of Birth :- Age as of 25/10/2015

04. Passport No :- (Pl. Attache copy of your pp.)

05. Asso. Name / Style / Chief Instructor's Name :-

06. Height :- ft Inches. Weight :- Kg.

07. Age Group 6 - 21 + (✓)

16 - 7	8 - 9	12 - 13	14 - 15	16 - 17	18 - 20	21 +	Girl	Boy

Grade (L - Level)

9,8,7 kyu (L-1)	6,5,4 kyu (L-2)	3,2,1 kyu (L-3)	Black (L-4)

Over 21 Black Belt Weight Class (kg)

Girl					Boy				
50	55	60	67	75+	45	50	55	67	75+

I do hereby Certify that above particulars are true and accurate of the best of my knowledge.

.....
Date

.....
Competitor's Signature

I Sensei/Renshi/Kyoshi Certify that above named competitor is a Student of my Association and Information given in this application are true and accurate.

.....
Date

.....
Signature of Chief Instructor

Note :- All Entries will be closed on 24th September 2015. Please forward the application form before the date.