

**The ANNUAL
CRESCENT MOON MARTIAL ARTS KLASSIC
Saturday, May 17th 2008
REGISTRATION FORM**

Name _____ Birth Date _____ Age _____ IFMA# _____
 Address _____ City _____ State _____ Zip _____
 Home Phone _____ Rank _____ Belt Color _____ Male/Female _____
 Martial Art School _____ Instructor _____ Phone# _____
 Write In Your Division #'s _____] _____] _____] _____] _____] _____] _____] _____] _____]

Canadian Money At Par For Tournament Must Show Proof Of Citizenship	Pre-Registration Post Marked By May 7th	Registration Post Marked After May 7th	Day Of Event	# Of Div.	Total Amount
Entry Fee-One or Two Divisions	\$45.00	\$50.00	\$55.00		
Additional Divisions – Per Division	\$ 5.00	\$ 8.00	\$10.00		
Spectator Adult	\$ 8.00	\$10.00	\$15.00		
Spectator Children (5-12)	\$ 5.00	\$ 7.00	\$10.00		
(Coaching without a pass will result in a penalty to that player) Coaches Pass (Must be affixed to wrist)	\$ 8.00	\$10.00	\$15.00		
IFMA Member Tournament Discount (\$ -5.00)	\$- 5.00	\$- 5.00	\$- 5.00		
Please Note: When Purchasing A Coaches Pass You Must Also Purchase A Spectators Pass!			Total Amount Due→		

Money Order or Certified Check Payable To: **E. J. Marsh**, 2207 Elmwood Avenue, Buffalo, NY 14216

I (Print Name) _____ the undersigned do hereby release International Federation of Martial Arts, Buffalo School Board, Richard Everage, Sr., Crescent Moon Martial Arts Klassic, Ron Cain, Diane Cain, Zeke Marsh, Leo Dennis, David Jones, Becky Jones, George Wade, Emma Wade Carlos Tearney, and any other person associated with this event in any capacity from any liability due to injuries, etc., that may occur as a result of my attendance/participation at this event. Furthermore, I hereby waive any compensation what so ever for the use of pictures, movies, media coverage, etc. utilized by those associated with this event, which may be used for profit making purposes. I clearly understand the fighting aspect of this sport and competition involves body contact. I have read, understand, and agree to abide by the rules associated with this event and assume full responsibility and any associated liability for infringement of such rules. Additionally, I am fully aware of my personal medical condition and hereby certify that I am mentally and physically fit to compete at this International Federation Martial Arts competition and also understand that a valid certificate should be presented at the tournament.

Competitor's Signature

Parent/Guardian (if under 18 years)

Date