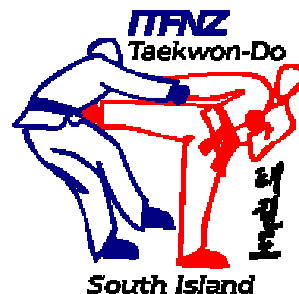




South Island Regionals

April 24th & 25th 2004,
Villa Maria College
Christchurch



Team Event Entry Form

Club: _____ Gender: Male / Female

Disclaimer

1. I will not hold ITFZN, the tournament organisers or tournament officials for any loss of personal property or injury sustained during the course of the tournament.
 2. I agree to abide by the ITFZN Tournament Rules as approved by ITFZN.
 3. I acknowledge that if I am not a Registered member of ITFZN I may not be allowed to compete.
- Competitors who are under 18 years need to have their Parent/Guardian sign the form.

Team 1

Events Pattern Sparring Special Technique Power Test*

Competitor 1 _____ Signed _____

Competitor 2 _____ Signed _____

Competitor 3 _____ Signed _____

Team 2

Events Pattern Sparring Special Technique Power Test*

Competitor 1 _____ Signed _____

Competitor 2 _____ Signed _____

Competitor 3 _____ Signed _____

Team 3

Events Pattern Sparring Special Technique Power Test*

Competitor 1 _____ Signed _____

Competitor 2 _____ Signed _____

Competitor 3 _____ Signed _____

* Power Test is restricted to persons of 18+, exemptions at the discretion of the tournament arbiter

Cost: \$9 per team per event

Signed:

Instructor: _____ Date: _____

Form must be correct before signing

Entry Forms are to be returned to YOUR INSTRUCTOR to be sent to Angela Barltrop, by the 1st of April 2004; the correct fee MUST accompany all entries.