



MARTIAL ARTS SOUTH AFRICA

NORTH WEST PROVINCE



ATHLETE REGISTRATION FORM 2026

FIRST NAME:				LAST NAME:					
Gender	M	F	Weight	(Kg)	Height	(cm)	Age	Date of Birth	(dd/mm/yyyy)
ID Number:				Passport Number:					
Email Address:						Phone Number:			
Style:				Instructor:					
Email Address:						Phone Number:			

BELT	MARK	TRAINING	SAMPLES
Novice	(X)	Between 1 year +	10 th , 9 th , 8 th , 7 th , gup/kyu
Beginner	(X)	Between 2 years +	6 th , 5 th , 4 th , gup/kyu
Intermediate	(X)	Between 3 years +	3 rd , 2 nd , 1 st , gup/kyu
Advanced	(X)	Between 4 years +	1 st Dan and Above

1st Division R _____, R _____ per division thereafter

DIVISION	DIVISION No:	COST PER DIVISION	TOTAL
Traditional Forms / Kata / Patterns			
Open Weapons Form / Kata			
Traditional Wooden Weapon Kata/ Forms			
Combat Weapons Sparring			
MASA Point Sparring			
MASA Continuous Sparring (Semi Contact)			
Traditional Kumite (MASA Rules)			
Gi Grappling (MASA Rules)			
Ju-Jitsu Kumite (Light Continuous)			
Contact Ju-Jitsu (Full Contact Continuous)			
Gi Grappling – Inclusive – Special Division			
RCFA – Semi Contact Sport Boxing			
RCFA – Semi Contact Close Combat			
RCFA – Semi Contact Supreme Fighting Artist			
MASA Low Kicks (Semi Contact)			
TOTAL			

FEE should be collected by Club Instructor and pay in MASA account, NO INDIVIDUAL PAYMENTS and no late payments.

Indemnity Statement: I, _____, hereby acknowledge that I am participating in the Martial Arts South Africa All Styles Champions event voluntarily and at my own risk. I understand and agree that Martial Arts South Africa (hereafter referred to as "the organization") shall not be held liable for any injury, loss, or damage that I may sustain during the event. I also grant the organization permission to take and publish pictures and videos of me during the event, understanding that they may be used for promotional purposes. I acknowledge that the organization complies with the Protection of Personal Information Act (POPIA) regarding the collection, storage, and usage of my personal data. By signing this indemnity form, I hereby release, indemnify, and hold harmless Martial Arts South Africa, its organizers, volunteers, sponsors, and affiliates from any and all claims, demands, liabilities, or expenses arising out of or in connection with my participation in the event.

Signature of competitor)

Signature of Parent or Guardian if under 18 years

Date