



PROSPERITY DOJANG

22 Stellenberg Street, Belair,
Bellville

www.prosperity-tsd.co.za Tel: 083 953 7467

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Combat Tang Soo Do Prosperity Martial Arts Center The Cape Combat League IV 2026

PROSPERITY MARTIAL ARTS CENTRE, INVITE YOU AND YOUR STUDENTS TO
THE CAPE COMBAT LEAGUE IV TOURNAMENT to be held at NGK Brackenfell Wes,
4 Janie Str, Ferndale Brackenfell, CAPE TOWN on the 10th of October 2026.

VENUE: NGK Brackenfell Wes
4 Janie Str, Ferndale, Brackenfell, CAPE TOWN

TIME: 7:00am Weigh-In
8:00am Judges Briefing
8:30am Run-in and Welcome
9:00am First Divisions to Start

COST: R 300 for 1 to 2 divisions.
R 50 extra for every extra division.

CATEGORIES: Semi-contact Point sparring
Semi-contact Continuous Sparring
Semi-contact Low Kick Sparring
Gi Grappling
No Gi Grappling
MMA Light
Ring Full Contact
Ring Low Kick
Combat League Ring K1 Light
Combat League Ring K1
Ring Semi Contact Sport Boxing
Ring Full Contact Sport Boxing
Combat Weapons (Battons)

ENTRANCE: Please use the Main Gate at 4 Janie str, Ferndale, Brackenfell, CAPE TOWN.

RSVP: Please have entries sent to Master Peter, peter@prosperity-tsd.co.za, by 4/10/2026
and payments done to **Account Name: WP CTSD Fund, Capitec Current account, acc. no. 1551687087; branch code 470010, Reference: Competitor Name / Club Name** before the 5th
October 2026, by the Head instructor. Email Proof of Payment to peter@prosperity-tsd.co.za



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ENTRY FORM- R 300 for 1 to 2 divisions and R50 for every additional division after.

Name		Weight & Height	
Date of Birth		Rank/Gup/Exp	
Gender		Email	
Style/Club		Tel Nr	

CATEGORIES

I wish to enter the following :

Tick appropriate box

☐	Semi Contact Point Sparring	☐	Ring Low Kick
☐	2min Semi Contact Cont. Sparring	☐	Ring K1 Light
☐	Semi Contact Low Kick Sparring	☐	Ring K1
☐	Gi Grappling	☐	Ring Semi Contact Sport Boxing
☐	No Gi Grappling	☐	Ring Full Contact Sport Boxing
☐	MMA Light	☐	Combat Weapons(Battons)
☐	Ring Full Contact	☐	Absolute No Gi Grappling

I, the undersigned, do hereby voluntarily submit my application for attendance and participation and do hereby assume full responsibility for any and all damages, injuries or losses that I may incur, if any, while attending or participating. I hereby waive all claims against the promoters, sponsors, SAKMAA, MASA, CTSD and their affiliates of the said tournament individually or otherwise, for any damages, injuries or losses that I may sustain or incur. I fully understand that any medical treatment given me will be of the first aid treatment only. I consent that any pictures furnished by me or any pictures taken of me in connection with this tournament can be used for publicity, promotion or television showing now or in the future, and I waive compensation in regard thereto. I have read and fully understand the above waiver (If under 18 this form must be signed by a parent or guardian). I hereby agree and verify that I am medically fit and able to participate at the event and confirm that it is my own responsibility to inform my Instructor / Team Manager of any illness or injury that I may have and that will affect my health or the safety of my fellow competitors.

(Date)

(Signature of competitor)

(Signature of Parent or Guardian if under 18 years)