



アフリカ空手団体空手会国際

Africa Karate Organisation Karate Kai International

CONSENT, INDEMNITY FORM (All competitors are to complete this form)

I the undersigned hereby submit my application to participate in The United full Contact Karate South African national tournament to be hosted by Karate Kai International on 2 and 3 May 2026 in Cape Town Western Cape

I do hereby consent and record that I will not have any claims of whatsoever nature arising out of whatsoever cause against the organisers or any persons during the event.

I will not hold the organiser/host responsible for any claims for damages, loss, death, injury, disability, cost and expenses arising out of my attendance and or participation for whatsoever cause at the event.

I have read, understand and agree to abide by the requirements associated with this event and assume all responsibility and any associated liability for infringement thereof. Additionally, I am fully aware of my (or my child's) personal medical condition and hereby certify that I am (my child is) mentally and physically fit to participate in this National Championships.

I consent to allow any reproductions of me or my likeness created in any manner whatsoever, photographed, filmed, or videotaped in connection with this event, which can be used for instruction, publicity, promotion, or television broadcast and I waive any, and all compensation for such.

DATED AT ON THIS.....DAY2026

COMPETITOR NAME (PRINT) COMPETITOR SIGNATURE I, the undersigned, being the parent/guardian of the above competitor who is still a minor (i.e. under the age of 18 years), hereby consent to all the conditions stated above and signed for by me for my child to participate in the above mention event.

DATED ATON THIS.....DAY of2026

Parent/Guardian/NAME (PRINT). Parent/ Guardian/Competitor Signature



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Emergency Contact number.....

Senior competitors are to sign the section below.

SIGNATURE I, the undersigned, hereby consent to all the conditions stated above and have signed below to participate in the above mention event. I accept and will follow all the rules and regulations of this full contact karate tournament.

DATED AT THIS.....DAY of.....2026

NAME (PRINT)

Competitor Signature