

2017 Jujitsu America Annual Convention

June 23-25, 2017 Crowne Plaza Hotel, Foster City, CA

Freestyle Self-Defense Competitor Registration

NAME:				AGE:
ADDRESS:		CITY:	STATE:	ZIP:
PHONE:		EMAIL:		
MALE/FEMALE:	WEIGHT:	YEARS/MONTHS	S OF TRAINING:	RANK:
NAME OF FREESTYLE SI	ELF-DEFENSE TF	EAM PARTNER:		
A MEMBER?* (Y or N) DOJO:INSTRUCTOR:				
*Note JA Member is defined current card-holding membe				
heirs, and administrators, waive and r to damages suffered by me directly or	elease any and all rights indirectly as a result of	to damage or claims against said attending, participating in, practic	organization, its governing body, of ing for, traveling to or from such ev	to be legally bound, hereby myself, my ficials, and members for injuries or rights rent, or against Jujitsu America, Crowne dition to participate in such activities.
Signature or Parent/Legal G	uardian (if under a	age of 18):		Date:
Printed Name:				
THIS FORM MUST BE S	SUBMITTED WIT	ГН A COMPLETED	& PAID CONVENTION	ON REGISTRATION FORM
(FLYER WIT	H CONVENTION I	REGISTRATION FORM IS	S AVAILABLE ON <u>www.ju</u> j	itsuamerica.org)
	MANDATORY	Y REGISTRATION FOR Saturday, June 24th, 7:0		
	FREEST	TYLE SELF-DEFENSE T	OURNAMENT STARTS:	

Complete Competition Rules Available Online: www.jujitsuamerica.org

PLEASE USE ONE FORM PER PERSON FOR EACH TOURNAMENT DIVISION YOU WISH TO COMPETE IN

Saturday, June 24th, at 4:00PM

Mail Form To: JUJITSU AMERICA ANNUAL CONVENTION

2822 Elmhurst Circle Fairfield, CA 94533