2022 WSKF INTERNATIONALS

June 23-26, 2022

Okinawa Shorin-Ryu Karate Dojo, Troy, OH 2588 State Route 718 Troy, OH 45373

WSKF Executive Board, Hanshi Tommie Harris, Hanshi Jack McPeek, Hanshi Jeff Leistner, Hanshi Glenda Olin

Registration prior to June 1, 2021 is Requested. ***No Late Registration Fees will be applied this year.

Complete this form for Each participant. Registration fee covers Awards Banquet.

\$150	Registration Fee (WSKF members)					\$	
\$115	Registration Fee (additional WSKF family members)					\$	
\$175	Registration Fee (Non WSKF members)					\$	
\$ 30	30 Additional Awards Banquet (12 yrs & older non training						
	individuals)	# of individu	ıals: x \$	30		\$	
\$ 15	Additional Awards Banquet (6-11 yrs non training						
	individuals)	# of individu	ials: x	\$15		\$	
	5 yrs & younge Internationals		X \$15	-		S	
• • •	s available this		// ψια			¥	
Please inc	licate size and	quanity					
Youth	Youth	Adult	Adult	Adult	Adult	Adult	
Med 10/12	2 Lg 14/16	Small	Med	Large	X-Large	XX-Large	

If you have questions, please call Kyoshi Leistner at 937-339-4646.

2022 WSKF Internationals Registration Form

Please fill out completely and send in this form and Registration Fee, CASH or CHECK (Checks payable to the WSKF) to 2486 St. Rt. 718, Troy, OH 45373 by June 1, 2021. Major credit cards (transaction fees may apply) or cash will be accepted from International Dojos.

Name		Age				
Address						
City	State	Zip				
Phone	WSKF #					
Dojo & Town						
Your Sensei						
Rank or Belt Color						
Shorin-Ryu Training Time						
Other Style(s) Studied & Training Time						

Participation Release:

Please read and sign as indicated. This must be signed for participation in any WSKF seminar event.

I do hereby voluntarily submit my application for attendance and participation in the Karate &/or Kobudo Seminar(s), and do hereby assume full responsibility for any and all damages, injuries, or loss that I may sustain or incur, if any, while attending or participating. I hereby waive all claims against the promoters, operators, or sponsors of said Karate Seminar individually or otherwise, for any claims for injuries that I may sustain. I fully understand that any medical treatment given to me will be First Aid treatment only.

I consent that any pictures furnished by me or any pictures taken of me in connection with the Seminar can be used for publicity, promotion, or television showing, and I waive compensation in regard thereto.

Student	Date	
(signature)		
Parent or Guardian	Date	
(signature for student under	18 years old)	
This form is available on-line: www.shorin-rvu.nd	et	