

FMAA Intra-School Tournament

A Benefit for St. Jude's Children's Hospital

Saturday November 19, 2016

Family Martial Arts Academy ~ 8618 SW Hall Blvd, Beaverton



Family Martial Arts Academy

SCHEDULE

9:00-10:30 am	6 years old and under
10:30am-12:30pm	7-14 years old
12:30-2:00 pm	adults ages 15+

Individual Donation: \$25

All students and families are encouraged to seek sponsors to raise funds for St Jude's Children's Hospital.

All Students are invited to participate
~ Events for Children and Adults ~
Invite your family and sponsors to come cheer you on!

100% of ALL FUNDS COLLECTED (including entry fees)
GO TO ST JUDES HOSPITAL FOR CHILDREN

Events for Tigers 1 – 2 - 3 (9:00 – 10:30 am):

-  **Kata**
-  **Self-Defense Technique**
-  **Sparring***

()All Tigers encouraged - see Sensei Danni or Sensei Julie w/questions.*

Events for ages 7-14 (10:30 am – 12:30 pm)

Events for ages 15+ (12:30 am – 2:00 pm)

(See Sensei Bryce and Sensei Verona with questions)

-  **Kata***
-  **Sparring***

(*)For each of the events listed, participants will be arranged by instructors according to ages, to be determined at the time of the event.

REQUIREMENTS:

For kata, you **must** wear the appropriate karate uniform.

For sparring, you **must** have a mouthpiece, hand guards, foot guards, and headgear.

Name: _____

Age: _____ **Current Rank (belt color):** _____

Event(s): ☐ kata ☐ self-defense techniques ☐ sparring

☐ \$25 (if able to pay)

☐ check ☐ cash ☐ charge my card on file

☐ I'd like to make an additional donation to St Jude's \$_____ (optional)

☐ I've raised at least \$100 – my entry donation is waived!

\$_____ **TOTAL DONATION amount attached.**

In consideration of my participation in this Family Martial Arts Academy event, I, the student/parent, relieve the Academy, its management, assigned staff and fellow students from any liability resulting from personal injury or loss.

Parent Signature: _____ **Date:** _____