

COLLEGIATE TEAM REGISTRATION FORM

Each team member must pre-register by **October 1, 2015**, and submit a Medical Questionnaire and a Waiver/Release Agreement. Competitors must be at least 18 years of age, full-time undergraduate or graduate college students only; no part-time students will be allowed to compete. **Proof of college enrollment for current semester and current ISKF membership cards must be presented at check-in.**

Only one team per event, per school. Teams may be composed of any combination of rank.

ALL MEMBERS OF A TEAM MUST BE FROM THE SAME COLLEGE

Registration fees are non-refundable, per team: \$50

School: _____

City: _____ State: _____

Coach: _____

Region: _____

Team Kata

(Kata Team may be any gender combination)

	Name	Rank
1. (Captain)		
2.		
3.		
4. (Alternate)		

Women's Team Kumite

	Name	Rank
1. (Captain)		
2.		
3.		
4. (Alternate)		

Men's Team Kumite

	Name	Rank
1. (Captain)		
2.		
3.		
4. (Alternate)		

Total Amount enclosed: \$ _____

Checks payable to:

ISKF Nationals-NW Region

Send all paperwork to:

Beckie Brocies, 13225 239th Way NE, Redmond, WA 98053

Postmarked by:

October 1, 2015