



**R.I.T.A ITF Irish Open 2015, Colour & Black Belt Tournament**

**National Basketball Arena, Tallaght, Dublin 24**

**Saturday November 21<sup>st</sup> 2015**

**Individual Application Form**

First Name: \_\_\_\_\_ Family Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ (Male / Female)

Grade: \_\_\_\_\_ (Kup / Dan)

Sections to compete:

Height: \_\_\_\_\_ cm

Patterns YES  / NO

Sparring YES  / NO

Weight: \_\_\_\_\_ Kgs

Special Tech YES  / NO

Power YES  / NO

I confirm that all the information given is true and correct and I agree to abide by the tournament rules and accept the Chief Umpire's decision as final.

I confirm that I am fully insured to take part in this event.

I confirm that I can be given Medical/First Aid treatment if required and that I may be photographed and videoed at the event.

Signature: \_\_\_\_\_ (If under 18 Years Parents or Guardians signature)

Please return to your instructor to have your name included on the online application form.