

**TEXAS STATE CHAMPIONSHIPS REGISTRATION -- A TEXAS HALL OF FAME EVENT - A.O.K. "A" RATED**  
**DATE: MARCH 12, 2011 LOCATION: LIVE OAK CIVIC CENTER , 8101 PAT BOOKER ROAD; S.A. TX. 78233**

Name \_\_\_\_\_ m/f \_\_\_\_\_ Weight \_\_\_\_\_ Rank \_\_\_\_\_  
 Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ AOK Competitor's Age (on 03/12/11): \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ ZIP \_\_\_\_\_  
 Home # \_\_\_\_\_ Work # \_\_\_\_\_ Email \_\_\_\_\_

SCHOOL NAME \_\_\_\_\_ INSTRUCTOR \_\_\_\_\_  
 SCHOOL ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_\_  
 TEL # \_\_\_\_\_ Email \_\_\_\_\_




**REGISTRATION FEE INFORMATION**  
 For Pre-registration price – you must postmark your entry by  
**03/05/11**

Make checks payable to: Professor Larry M. Lockhart, Sr.  
 Mail to:  
 Martial Arts P.D.C.  
 1739 S.W. Loop 410, #804-167  
 San Antonio, TX 78227  
 (210) 675-0838

**\*\*Please – no checks at the door – only cash.\*\***  
**\*\*NO REFUNDS – PLEASE DON'T ASK.\*\***



**ENTER DIVISIONS HERE →**      /      /      /      /      /

<b>LOOK</b> 	<b>Envelope Post-marked by 03-05-11</b>	<b>Envelope Post-marked after 03-05-11</b>
<b>AOK State Divisions – Entry Fee Includes 2 AOK Divisions Additional AOK Divisions Only</b>	\$45.00 \$10.00 X ____ =	\$50.00 \$15.00 X ____ =
<b>SPECIAL: *Demo Division And/Or *NO Contact Fun Flag Sparring</b>	\$45.00	\$50.00
<b>All Competitors in these divisions will WIN Awards!</b>	<b>No \$10.00 Additional Events Added! *These Are Non-AOK Divisions</b>	<b>No \$10.00 Additional Events Added! *These Are Non-AOK Divisions</b>
<b>Spectator Pass (3 and up)</b>	\$5.00 X ____ =	\$10.00 X ____ =
<b>Total</b>	\$	\$

**WAIVER OF INJURY**

I, (Print Name) \_\_\_\_\_ the undersigned, do hereby release The Amateur Organization Of Karate (AOK), Dr. Larry M. Lockhart, Sr., all tournament promoters and all other persons associated with this event in any capacity, from any liability due to injuries, etc. that may incur as a result of my attendance and/or participation at any AOK event. Furthermore, I hereby permanently waive any compensation whatsoever for the use of pictures, videos, media coverage, etc., utilized by those associated with this event which may be used for profit making purpose.

I clearly understand the fighting aspect of this sport and competition involves bodily contact. I have read, understand and agree to abide by the rules associated with AOK events and assume all responsibility and any associated liability for infringement of such rules. Additionally, I am fully aware of my personal medical condition and hereby certify that I am mentally and physically fit to compete at said tournament and also understand that a valid birth certificate may be required to compete at an AOK tournament.

X \_\_\_\_\_

\*If under 18 yrs., signatures of Parent or Guardian that assumes complete responsibility.

