

**REVISED
NEW SCHEDULE**

**Keith Bly & Jamie Yowell
Present
An Open Martial Arts event**

2016 Natural State Classic

Time: (NEW TIMES -REVISED 9/13/2016)

7:30-Grappling Weigh In

8:00-Grappling Begins

8:45-Musical Extreme Forms/Weapons Forms all ages

9:15- Traditional Weapons Forms all ages

9:45-6 & Under Divisions

All Black Belt Forms (Adults/Juniors)

After 10:30-7 and Above

Divisions to start-All Remaining Events

Rules:

&

Online Registration

(Opens August 1, 2016)

www.dskmartialarts.com



Contact:

james@yowellkarate.com

501-743-1136

Jacksonville High School, 2400 Linda Lane, Jacksonville, AR 72076

October 8, 2016
www.dskmartialarts.com

Registration Form – Natural State Classic Martial Arts Championship

Name: _____ Rank: _____ Age: _____ Sex: _____ Email: _____

Phone: _____ Address: _____ City: _____

State: _____ Zip: _____ Instructor's Name: _____ School: _____ School Address: _____

I the undersigned, hereby release MATAO, LLC, ASKC, DSK South Martial Arts, James Yowell, Keith Bly, Jacksonville High School, the Arkansas Sport Karate Circuit, the Natural State Classic, its employees, representatives and/or agents, and all persons and entities associated with this event in any capacity, from all liabilities due to injuries, etc. that may occur as a result of my attendance and/or participation in the above specified event. Furthermore, I hereby waive any compensation whatsoever for the use of pictures, movies, media coverage utilized by those associated with this event. I understand that fighting involves bodily contact. I have read, understood and agree to abide by the rules and guidelines associated with this event.

Signature: _____ Date: _____

Parent Guardian (if Appl) _____ Date: _____

Check all that apply:

Payment Method:

<input type="checkbox"/>	Traditional/Creative Form	<input type="checkbox"/>	Musical/XMA Form
<input type="checkbox"/>	Traditional/Creative Weapon	<input type="checkbox"/>	Musical/XMA Weapon
<input type="checkbox"/>	Point Sparring	<input type="checkbox"/>	Grappling
<input type="checkbox"/>	Lil Ninja (3-6 year olds)	<input type="checkbox"/>	Karate Flag
<input type="checkbox"/>	Team Demo/Form	<input type="checkbox"/>	Team Fighting

<input type="checkbox"/>	Check
<input type="checkbox"/>	Visa
<input type="checkbox"/>	MasterCard
<input type="checkbox"/>	Money Order

Event Date: October 8, 2016
 Pre- Registration – Must be in by 9/23/2016
 _____ x \$65 (1 or 2 Divisions)
 _____ x \$ FREE Each Additional Event
 _____ = Total

Registration – After 9/23/2016 & Day Of
 _____ x \$65 (1 or 2 Divisions)
 _____ x \$ 20 Each Additional Event
 _____ = Total

Spectators \$5-6 year olds and under free to spectate.

_____ Credit Card #

_____/_____/_____
 Expiration CCV Code

_____ Name on Card

_____ Billing Address

_____ City, State Zip

I authorize MATAO, LLC to charge my credit card to the total indicated for entry in the Natural State Classic. I understand there are no refunds and everything on this form is mine and true.

_____ Signature

Mail Registrations and Payments to:

MATAO, LLC, 9 Danbury Lane, Jacksonville 72076