

# BAI RUI NATIONAL CHAMPIONSHIPS

## Saturday 4<sup>th</sup> & Sunday 5<sup>th</sup> November 2017



PLEASE PRINT COMPETITOR DETAILS IN CAPITAL LETTERS

Surname:		Given Names:		
Height:	cm	Weight:	kg	Rank:
				Gender:
Bai Rui Club or School:			Bai Rui Only Red Card No:	
Contact Number:				DOB:

**Which events are you entering?**

- Sparring**
- Patterns**
- Special Techniques**  
All ages
- Breaking**  
Must be 13 years or over
- Pre Arranged Sparring**
- Team Patterns**
- Team Sparring**  
(Time permitting)

**Requested Entry Due Date:** 27<sup>th</sup> October 2017

**Venue:** Brisbane Grammar School 24 Gregory Terrace, QLD 4000

**Schedule:** 4<sup>th</sup> & 5<sup>th</sup> Nov - Registrations from 7am, 8am start.

Check <http://www.bairuitournaments.com> for the latest information.

**All competitors must wear a mouth guard and all male competitors a groin guard. Head Protectors are optional but highly recommended.**

- Senior (13 years and over) - \$66**
  - Junior (12 years and under) - \$55**
  - Extra Junior (If part of a family) - \$33 \***
- \* \$33 for every junior where there is already a full price competitor (junior OR senior) in the same family.
- (Includes GST. Use your age on the day of the Tournament)

In consideration of Bai Rui P/L, as hosts of this event, agreeing to accept me to participate in all activities to do with this tournament, I acknowledge and agree that I do so entirely at my own risk and shall not hold the organisers, officials, contestants, the parent body or anyone else whosoever responsible for accident, injury or loss of any kind. I further acknowledge that I am participating in a body contact activity and that whilst every endeavour will be made to ensure my welfare, there is always a risk of bodily injury. The tournament I am now participating in will be totally my responsibility and no claims implied or otherwise will be made.

I also authorize Bai Rui P/L to use video and photographic records taken at this tournament in its advertising and promotional activities including but not limited to publication online.

Signature of the Student: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian (if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

<b>Instructor's comments:</b>	<b>Instructor's Name:</b>
	Office Use Only:

**\*INSTRUCTORS and MANAGERS NOTE\*** Please enter your competitors into the online tournament system (MATS) at <http://www.bairuitournaments.com> before submitting the forms. You can sign up for a login on that page. Email [tournament@bairui.com](mailto:tournament@bairui.com) or phone 0428 274 997 if you have any problems or questions. You will also need to return your competitor's forms to Bai Rui **HQ AT LEAST 1 week prior** to the tournament. Bai Rui Head Office contacts : Phone: 07 3325 1180, 0435 529 505, and 0431 022 074 Address: 3 St Andrews Crt, Albany Creek, QLD, 4035