



4 Towers Martial Arts  
205 Ambersweet Way  
Davenport, FL 33897

## Ronin Samurai Challenge

School Owners/Instructors:

4 Towers Martial Arts/Shi Tou Sei Do Combat Karate Federation humbly extends an invitation to your young warriors to compete at the **Ronin Samurai Challenge**. Enclosed you will find the following:

- Registration forms – please make copies for your students.
- Waiver and release – please make copies for your students.
- COVID-19 waiver – please make copies for your students and spectators.
- Medical release form – please make copies for your students.
- Belt ranks form – only one copy please complete your belt rank form
- Poster to display in your Dojo

*Pre-Registration starts on 09/16/2023 up till 10/20/2023*

Three payment methods for pre-registration:

- Online via a credit card – [www.4towersmartialarts.com/ronin-samurai-challenge](http://www.4towersmartialarts.com/ronin-samurai-challenge)
- In person – Cash, money order or cashier check (*No personal checks*)
- Mail – Postmarked no later than **10/13/2023** – must be paid with a money order or cashier check (*No personal checks*): 4 Towers Martial Arts, P.O. Box 270, Minneola, FL, 34755

### Cost breakdown

	Pre-registration (Prior to 10/20/23)	Day of the event registration (Cash Only)
One or two events	\$65.00	\$75.00
Each additional event	\$10.00	\$10.00
Spectator fee	\$10.00	\$10.00

If you have any additional questions, please feel free to call:  
Hanshi Butch Torres @ 352-255-6633



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## Ronin Samurai Challenge REGISTRATION FORM

Competitors Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Parents Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip Code: \_\_\_\_\_

School Name: \_\_\_\_\_ School Phone Number: \_\_\_\_\_

School Address: \_\_\_\_\_ School City/State/Zip Code: \_\_\_\_\_

Instructors Name: \_\_\_\_\_

Please complete all the following information boxes: **All boxes must be completed.**

Age – Check one						
5-6		7-8		9-10		11-12
						13-14
						15-17

Special Warriors Divison	
Yes	No

Gender – Check one	
Female	Male

Division – Check One	
	Beginner
	Intermediate
	Advanced
	Black belt

Events – Check that apply	
	Kata (forms)
	Kobudo (weapons)
	Kumite (sparring)

Belt Color

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	Pre-registration (Prior to 10/20/2023)		Day of the event registration (Cash Only)	
	Qty	Total	Qty	Total
One or two events	\$65.00		\$75.00	
Each additional event	\$10.00		\$10.00	
Spectator fee	\$10.00		\$10.00	
<b>Total:</b>			<b>Total:</b>	



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## Ronin Samurai Challenge

### Waiver and Release

I understand that Karate/Martial arts is a contact sport, as such that I am allowing my child to participate in an activity that involves physical contact and physical activity. I understand that injuries may happen which may potentially involve great bodily harm and even death and do so with a risk. I waive any claim or cause of action I may have against the promoters, host of the tournament, judges, other competitors, volunteers, or spectators and including the Ronin Samurai Challenge that may arise out of my child's participation in this tournament. I further agree to indemnify and hold harmless the host of the tournament, judges, other competitors, volunteers, or spectators and including the Ronin Samurai Challenge from any and all cause of actions or claims which may arise from another competitor due to my child's participation or actions in the tournament. My child agrees to conduct themselves in a sportsmanlike manner and understand that if they fail to do so, they may be disqualified from the tournament and not entitled to a refund. I understand that this contract is binding, non-transferrable, non-cancelable and I will not be entitled a refund for any reason.

The undersigned agrees that by participating in the Ronin Samurai Challenge all participants grant 4 Towers Martial Arts (4TMA), consents to filming, videotaping, or audio recordings or other means of electronic, print or publication by 4TMA. I agree that these images/voice recordings may be used for a variety of purposes and that these images may be used without further notifying me. I further acknowledge that I will not be compensated for the use and that 4TMA owns all rights to the images, videos and recording and to any copied works created by them. I waive any right to inspect the uses of printed or electronic copy. I hereby release 4TMA and its agents and assigns from any claims that may arise from these uses, including without limitation claims of defamation or invasion of privacy, or infringement of moral rights or rights of publicity or copyright.

\_\_\_\_\_  
Childs Name Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parents Name Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parents Signature



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## COVID-19 Waiver

Due to the 2019-2022 outbreak the novel Coronavirus (COVID-19), the Ronin Samurai Challenge is taking extra precautions with the care of every individual to include health history review and enhanced sanitation/disinfecting procedures in compliance with the CDC guidelines.

Please initial in the box provided to indicate that you have read and agree to the terms set forth in this additional waiver and release statement.

I attest that:

	I am not experiencing any symptoms of COVID-19 that include Fever, Fatigue, Dry Cough, Difficulty breathing, Loss of taste or smell.
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	I as well, as all household members have not been diagnosed with COVID-19 within the past 30 days.
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	I as well, as all-household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days.
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	I understand that the Ronin Samurai Challenge nor 4 Towers Martial Arts cannot be held liable for any exposure to the COVID-19 virus by misinformation on this form or health history provided by each individual.
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The Ronin Samurai Challenge is following these enhanced procedures to prevent the spread of COVID-19:

- Personal preference may be used to wear a mask
- Mask available upon request
- Hand sanitizer stations
- Recommendations of social distancing

By signing below, I agree to each statement above and release the Ronin Samurai Challenge and 4 Towers Martial Arts from any liability for unintentional exposure or harm due to COVID-19.

\_\_\_\_\_  
Childs Name Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parents Name Printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parents Signature





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## Ronin Samurai Challenge

### Medical Release Form

(Only needed if the competitor has a medical condition)

I, (print name) \_\_\_\_\_, hereby authorize in advance any necessary medical treatment required for my child while at the Ronin Samurai Challenge. I also acknowledge that if my child has any special medical needs I will complete the form below.

\_\_\_\_\_  
Childs name printed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parents name printed/Signature of parent

\_\_\_\_\_  
Date

Childs name:	
Childs date of birth:	
Allergies:	
Medications:	
Past Medical History:	