



# 16<sup>th</sup> IMA Utah Karate Tournament Clinic

Saturday, February 8, 2025

IMA Utah Dojo

2258 Fort Union Blvd, Cottonwood Heights, UT 84121  
**Schedule – 9:00 am to 1:00 pm (all times approximate)**

9:00 – 9:30 am *Discuss Kata Rules*

9:30 – 10:30 am *Kata Competition*

10:30 – 11:00 am *Break*

11:00 – 11:30 am *Discuss Kumite Rules*

11:30 – 1:00 pm *Kumite Competition*

All ages & levels are welcome and encouraged.

The clinic is particularly beneficial for first-time competitors.

Snacks will be provided to all competitors.

All competitors will also receive a certificate of participation after the clinic is complete.

## Individual Registration Only - \$60 (kata, kumite, or both)

Please make payments (Check, Cash, ACH) to IMA of Utah  
Registration closes February 6, 2025. No at the door registration!

**Fees are non-refundable.**

Beginner     Novice     Intermediate     Advanced    Gender:  Male  Female  
0-2 yr training    2-3 yr training    3-4 yr training    5+ yr training    DOB: \_\_\_\_\_  
White-Orange    Green-Blue    Brown    Jr BB & up    Age: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Student Rank: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### ADULT & MINOR AMATEUR ATHLETIC WAIVER & RELEASE OF LIABILITY

In consideration of being allowed participating in any way in the 2025 IMA Utah Tournament Clinic athletic/sport program, and related events and activities, the undersigned:

1. Agrees that prior to participating the participant and/or Parent or Guardian (if under 18), will inspect the facilities and equipment to be used, and if the participant and/or parent or guardian, believes anything is unsafe, they will immediately advise the supervisor of the IMA Tournament Clinic or other Tournament officials of each condition(s) and refuse to participate.
2. Acknowledge and fully understands that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and serve social and economic losses which might result not only from their action, inaction or negligence but the actions, inaction or negligence of others, the rules of play, or the condition of the promises or of any equipment used. Further, the participant, and/or parent or guardian acknowledges that there may be other risks not known or not reasonably foreseeable at this time. The participant and/or parent or guardian assumes all the forgoing risks and accepts personal responsibility for the damages following such injury, permanent disability or death.
3. Releases, waives, discharge and covenants not to sue the IMA of Utah Association, Mr. Marius Gilca, its affiliated clubs, regional sports organizations, their respective administrators, directors, agents, coaches and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessees of premises used to conduct the event, all of which are hereinafter referred to as "releases" from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the release or otherwise.
4. All entries are final; no refunds will be given. I fully understand that any medical treatment given will be of a first aid treatment type only. I consent that any pictures furnished by me or any pictures taken of me in connection with the tournament can be used for publicity, promotion or television showing now or in the future, and I waive compensation in regard thereto. All participation in any event or class in this tournament is by permission only. The Director or his authorized agent(s) reserve the right to refuse entry to any person, school, team or club. The undersigned has read the above waiver and release, understand that they have given up substantial rights by signing it and sign it voluntarily.

\_\_\_\_\_  
Signature of Contestant

\_\_\_\_\_  
(if under 18, Signature of Parent/Guardian)

\_\_\_\_\_  
Date

**\*\*Mouth guard required for ALL kumite. Students will not be allowed to fight without one!!!\*\***