

2016 GREAT LAKES PRO-AM

P R E - R E G I S T R A T I O N

“Deadline June 1, 2016”

\$60 Pre-Registration for all events----- \$5 Spectators
 \$65 first event \$5 each additional--Day of Event

NO CHECKS ACCEPTED DAY OF EVENT

Circle the event(s) for which you are competing

<u>Weapons</u>	<u>Forms</u>	<u>Sparring</u>	<u>Continuous Sparring</u>
8 & Under Nov	5 & Under	5 & Under	Girls
8 & Under Adv	6 Nov	6 Nov	Boys
9-10 Nov	6 Adv	6 Adv	Adult
9-10 Adv	7-8 Nov	7-8 Nov	Girls/Boys
11-12 Nov	7-8 Int	7-8 Int	Girls/Boys
11-12 Adv	7-8 Adv	7-8 Adv	Girls/Boys
13-15 Nov	9-10 Nov	9-10 Nov	Girls/Boys
13-15 Adv	9-10 Int	9-10 Int	Girls/Boys
16+ Nov	9-10 Adv	9-10 Adv	Girls/Boys
16+ Adv	11-12 Nov	11-12 Nov	Girls/Boys
10 & Under Black Belt Trad	11-12 Int	11-12 Int	Girls/Boys
10 & Under Black Belt Open	11-12 Adv	11-12 Adv	Girls/Boys
11-12 Black Belt Trad	13-15 Nov	13-15 Nov	Girls/Boys
11-12 Black Belt Open	13-15 Int	13-15 Int	Girls/Boys
13-15 Black Belt Trad	13-15 Adv	13-15 Adv	Girls/Boys
13-15 Black Belt Open	16-34 Nov	16-34 Nov	Men/Women
16-34 Black Belt Trad	16-34 Int	16-34 Int	Men
16-34 Black Belt Open	16-34 Adv	16-34 Adv	Men/Women
35+ Black Belt Men Trad	35+ Nov	35+ Nov	Men/Women
	35+ Int	35+ Int	Men
	35+ Adv	35+ Adv	Men/Women
	10 & Under Black Belt Trad	Black Belt -10	Girls/Boys
	10 & Under Black Belt Open	Black Belt 11-12	Girls/Boys
	11-12 Black Belt Open	Black Belt 13-14	Girls/Boys
	11-12 Black Belt Trad	Black Belt 15-16	Girls/Boys
	13-15 Black Belt Open	Black Belt 17+	Women
	13-15 Black Belt Trad	Black Belt 17-34	Men LW/MW/HW
	16-34 Black Belt Open	Black Belt Men 35+	
	16-34 Black Belt Trad		
	Women Black Belt Trad		
	35+ Black Belt Men Trad		

NAME: _____ BIRTH DATE: _____ - _____ - _____ AGE: _____ BELT RANK _____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

PHONE: _____ MARTIAL ARTS SCHOOL _____

In consideration of my and or my child's participation in the above referenced event at the University of Michigan-Dearborn, I agree to assume the risks incidental to such participation and use (which risks may include among other things muscle injuries and broken bones). I hereby assume all risks arising from said event and release the event directors, The University of Michigan-Dearborn and any of their agents, officers, and employees in the event of any claims due to injury to the participating party. I am aware of the participant's medical conditions and hereby certify that the participant is mentally and physically able to participate.

Signature _____ Date: _____
 Guardian signature if under the age of 18

Pre-Registration Deadline
June 1, 2016

Send Checks/Money Orders and registration forms to:
Plowden's Championship Martial Arts
30243 Spring River Dr.
Southfield, MI 48076

FLOWDEN'S CHAMPIONSHIP MARTIAL ARTS
PRESENTS
THE GREAT LAKES PRO-AM



JUNE 12, 2016

**UNIVERSITY OF MICHIGAN-DEARBORN'S
FIELDHOUSE**

4901 EVERGREEN RD. | DEARBORN, MI | 48128

**CONTACT: RICHARD FLOWDEN
313-452-7215**