



March 5, 2009

Dear Karate Friend,

We hope this letter finds you in good health and training hard this New Year. We are pleased to personally invite you and your dojo to compete in the 2nd annual Haliwell Cup Tournament for Olympic Sport Karate.

At our Haliwell Cup Tournament being held **August 15, 2009**, we are offering a REFEREE COURSE to obtain LICENSING or UPGRADE LICENSE for KATA and/or KUMITE. Please refer to the attached schedule for fees and times of the Referee License Courses and Haliwell Cup Tournament.

The success of all tournaments depends on the quality of our referees. The Referee course will be conducted by **Sensei Alex Miladi member USA-NKF Referee Committee, PKF & WKF Karate Referee**. The study of the rules and written test is scheduled for **August 14th – 16st** at **Faith Builders International Ministries and Haliwell Studio** in Oak Creek, Wisconsin. www.haliwellstudio.com



The USA-NKF is the National Governing Body for sport karate in the United States and is a member of the U.S. Olympic Committee. This outstanding group of karate-ka spearheaded the drive that put karate into the Pan American Games and now has recently moved to the highest level of Olympic status. The USA-NKF is working to develop athletes and technical personnel who will again prove throughout the world that the United States of America is the true international leader of the martial arts.

This is the second time that official USA-NKF Referee Licensing is being offered in Wisconsin, and is being held at the only school in Wisconsin registered with the USA-NKF. This is an excellent opportunity for athletes to monitor the course in order to have a better understanding of the rules of competition. This course is being offered at the reduced rate of \$80.00 for each license to help us increase the quality of our referees for this and all future events. Please don't miss this great opportunity to improve your skills.

To register for the referee license course and/or the Haliwell Cup Tournament, please complete the attached form(s) and return it to the address below as soon as possible. You can also visit www.haliwellstudio.com for more information and downloadable forms.

Hotel accommodations and area activity information will be provided in future mailings.

Thank you and we look forward seeing you there.

Sensei Anthony Haliwell

Make Money Order payable to: Haliwell Studio

Payments by Credit Card Are Available (Visa, Mastercard, Discover, American Express accepted)

Send to Haliwell Studio, 932 E. Rawson Ave-Oak Creek, WI 53154

Questions please call 414-762-6180

USA-NKF Rules may be downloaded at <http://www.usankf.org/>

2009 HALIWELL CUP

Sanctioned by



USA-National Karate Federation
National Governing Body for Karate
Member United States Olympic Committee



SCHEDULE OF EVENTS

FRIDAY, AUGUST 14, 2009

5:00 p.m. – 8:00 p.m.

REFEREE LICENSE COURSE: KUMITE (*Held at Haliwell Studio*)

SATURDAY, AUGUST 15, 2009

7:00 a.m. – 8:00 a.m.

REFEREE LICENSE COURSE: Kumite Practical Gestures Practice
Referee License Course Kumite Test will be held during the Tournament
(*Held at FaithBuilders International Ministries*)

7:30 a.m.

Late Registration Begins for Haliwell Cup Tournament

8:00 a.m.

HALIWELL CUP TOURNAMENT
(*Held at FaithBuilders International Ministries*)

SUNDAY, AUGUST 16, 2009

REFEREE LICENSE COURSE - KATA (*Held at Haliwell Studio*)

8:00 a.m. – 11:00 a.m.

Kata Presentation & Written Exam

11:00 a.m. – 12:00 p.m.

Lunch

12:00 p.m. – 2:00 p.m.

Kata Practical Test

FEES

*Please add \$10 for late registration fee for all events if registering after ***July 31, 2009***

No Refunds

REFEREE LICENSE COURSE FEES:

\$80 – Kata Referee License Only

\$80 – Kumite Referee License Only

\$150 – Kata & Kumite Referee License

\$25 – Referee Book - \$25

Monitoring (Audit) Fees: 50% of above stated price

TOURNAMENT FEES:

\$50 – Individual Entry, 1 Event

+\$10 for each additional event (e.g. \$60, 1 Kata & 1 Kumite event)

\$100 – Per Team, Per Event

TOURNAMENT FEES:

Free – Children 5 & Under

\$5 – All Others

SEND PRE-REGISTRATION INFORMATION TO:

Please make checks or money orders payable to: Haliwell Studio

932 E. Rawson Ave-Oak Creek, WI 53154

Questions Please Call: 414-762-6180



OFFICIAL'S NUMBER _____ (For Office Use Only)

U.S.A.-N.K.F. REFEREE LICENSE COURSE ENTRY FORM

Please staple 2 pictures
of yourself
in this box
before returning
application
and fee.

2009 USA-NKF Membership No.: _____

☐ New or Upgrade KATA License Fee: \$80.00 ☐ Monitoring Only Fee: \$40.00 ☐ Referee passport: \$25.00
☐ New or Upgrade KUMITE License Fee: \$80.00 ☐ Monitoring Only Fee: \$40.00 ☐ Referee passport: \$25.00
☐ New or Upgrade KATA & KUMITE License Fee: \$150.00 ☐ Monitoring Only Fee: \$75.00 ☐ Referee passport: \$25.00

NAME: _____ BIRTHDATE: _____ USA-NKF KARATE GRADE: _____

ADDRESS: _____ PHONE: _____ SEX: _____ AGE: _____

CITY: _____ STATE: _____ ZIP: _____ EMAIL: _____

CERTIFICATION RECORD

RANK	DATE	STYLE RANK	DATE	USA-NKF, Federation, System sanctioned rank
1st. Dan	_____	_____	_____	_____
2nd. Dan	_____	_____	_____	_____
3rd. Dan	_____	_____	_____	_____
4th. Dan	_____	_____	_____	_____
5th. Dan	_____	_____	_____	_____
6th. Dan	_____	_____	_____	_____
7th. Dan	_____	_____	_____	_____
8th. Dan	_____	_____	_____	_____

USA-NKF REFEREE QUALIFICATION: KUMITE: _____ KATA: _____

DATE: _____ PLACE: _____

RED WKF PASSPORT: Place of Issue: _____ Date: _____

In Lieu of an Official Passport, please list all national and internationally sanctioned seminars attended with two photos attached.

<u>DATE</u>	<u>LOCATION</u>	<u>INSTRUCTOR</u>	<u>QUALIFICATION ACHIEVED</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONAL CERTIFICATION

I hereby certify that the above facts are true and accurate and that I fully understand that any certification of recognition given to me may be withdrawn in the event of misrepresentation or fraud.

Personal Signature: _____ Date: _____

(DO NOT WRITE IN THIS BOX - FOR OFFICIAL USE ONLY)

Written Exam:
Examiner's Comments (if any):
Passed As:

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USA-National Karate Federation
National Governing Body for Karate
Member United States Olympic Committee

Control #: I _____

Club Code: _____

PD: \$ _____

Date: _____

TOURNAMENT INDIVIDUAL REGISTRATION

(Please Print)

Last Name First Name *USA-NKF Membership # (if applicable)

Home Address

City

State

Zip Code

Home Phone Number

Sex

Age

Date of Birth (MM/DD/YY)

Date Started Training

Inactive Months

Kobudo Experience

Rank: Kyu/Dan

Belt Color

Weight

E-mail Address

*USA-NKF Membership will be available at the door. You **DO NOT** have to be a member to compete.
Fees for membership to the USA-NKF must be remitted to USANKF.

Dojo Name

Style of Karate

Name of Sensei

Rank of Sensei

Dojo Address

City

State

Zip Code

Dojo Phone Number

Dojo E-mail / Web Address

Enclose this form along with your Event Selection Form, Waiver form, and payment.

2009 HALIWELL CUP

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PARTICIPANT EVENT SELECTION FORM

Control #: I/T _____

Club Code: _____

PD: \$ _____

Date: _____

Last Name

First Name

*USA-NKF Membership # (if applicable)

Age: (Check One)

_____ Kinder – 6 & Under

_____ Senior – 18 – 34

_____ Youth – 13 & Under

_____ Masters – 35 & Over

_____ Cadet – 14 – 17

TRAINING EXPERIENCE: (Check One)

- _____ Beginner - Under One Year
_____ Novice - Under Two Years
_____ Intermediate - Under Three Years or Brown Belt
_____ Advanced - Three+ Years or Black Belt

EVENTS:**

- _____ WKF Mandatory Kata* _____ Open Kata
_____ WKF Kumite* _____ Open Kumite
_____ Team Kata
_____ Team Kumite

*Athletes competing in WKF events must be a registered member of USA-NKF.

**Please complete an Individual Registration form for WKF Mandatory Kata, WKF Kumite, Open Kata, and Open Kumite events. Complete a separate Team Registration form for Team Kata or Team Kumite.

Tournament Director Reserves the Right to Split or Combine Divisions!

Pre-registration Fees (by July 31):

Individual: 1 Event – \$50, +\$10 for each add'l event

Team: \$100 per team, per event

(+\$10 for late registration to all events after **July 31**)

Make payable to: Haliwell Studio

Enclose this form with your Individual Registration, waiver, and payment and mail to:

Haliwell Studio, 932 E. Rawson Ave, Oak Creek, WI 53154

Questions Please Call: 414-762-6180

Adult & Minor Member Waiver and Release of Liability

In consideration of being allowed to participate in any way in the Haliwell Studio & athletics/sports program, and related events and activities, the undersigned:

1. Agrees that prior to participating, they (if under 18) Parent or Guardian, 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 their instructor, coach, supervisor or personnel of such condition(s) and refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve a potential risk of serious injury, including permanent disability, death, and severe social economic losses which might result not only from their own actions, in actions or negligence but the action, inaction's or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
3. Release, waive, discharge and covenant not to sue The Haliwell Studio, USA National Karate-Do Federation its officers, their respective administrators, directors, agents, coaches and other employees of the organization, other participants, sponsors, advertisers, and if applicable, owners and lessees of premises used, 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 alleged to be caused in whole or in part by the negligence of the release or otherwise.
4. Fully understands that any medical treatment given will be of a first aid treatment type only.
5. Consent that any pictures furnished by me or any pictures taken of me in connection with the classes or any event can be use 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 is by permission only. The Chief Instructor or his authorized agent(s) reserve the right to refuse entry to any person. All athletes that compete in WKF Kumite or Mandatory Kata must be USA-NKF registered Athletes.
6. Statement of Health. By me and/or parent/legal guardian's signature below I confirm that I am in sound health and there is no reason why I cannot become a member of this Academy or participate in said event(s).

Please Read Carefully! These rules will apply for anyone who becomes a participant of said events.

1. All athletes must exhibit behavior and manners consistent with the code of "Karate- Do" and good sportsmanship. Any acts or statements which are disruptive to the smooth operation of any class or event, or which are criminal, insulting, offensive, or otherwise seriously inappropriate may result in immediate dismissal from any outgoing class or event.
2. No participant of this stated event(s) will be allowed to participate where it appears that such person has used, or is under the influence of, any alcohol or illegal drug or narcotic. Athletes found in possession of any alcoholic beverage, illegal drug, or narcotic substance in this Academy may be disqualified as a participant from said event(s).
3. All athletes participating in sponsored events must wear a clean, white Karate GI (uniform). No style patches, names, signs, slogans, or the printed or embroidered materials of any kind are permitted anywhere on the uniform jacket or pants, except for the manufacturers labels. In the discretion of the member, an official "USANKF" patch, may be worn on the left breast area of the Gi Jacket.

The undersigned has read the all parts of the waiver and release, understand that they have given up substantial rights and signed this waiver voluntarily.

Member Signature

Signature of Parent/Guardian if under 18

HALIWELL CUP TOURNAMENT

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USA-National Karate Federation
National Governing Body for Karate
Member United States Olympic Committee

Control #: T _____

Club Code: _____

PD: \$ _____

Date: _____

TOURNAMENT TEAM REGISTRATION

(Please Print)

Team Name _____

City _____

State _____

Zip Code _____

Age(s) _____

Sex (M/F or Both) _____

CHECK EACH CATEGORY IN WHICH YOU WILL COMPETE

☐ **Team Kata**

☐ **Team Kumite**

Name #1 _____

AGE _____

Name #2 _____

AGE _____

Name #3 _____

AGE _____

Dojo Name _____

Club Code (admin use only) _____

Name of Sensei _____

E-mail _____

Style of Karate _____

Enclose this form along with your Event Selection Form, each Team Member's Waiver Form, and payment.