

| In order to participate, athletes must meet the following criteria: | | | | | |
|---|--|---|--|--|--|
| Must be a registered participant in the | Must be a registered guest at one of the | Athlete credential & hotel voucher must | | | |
| 2017 AAU National Championships. | hotels listed below. | be presented for participation. | | | |
| · ' ' | | | | | |

| □ KUMITE CLINIC 1 TIME: 10 AM - 11 AM | | | □ KUMITE CLINIC 2 TIME: 11 AM - NOON | |
|---------------------------------------|----------------------|--------------------|--------------------------------------|-------------|
| Male | Female | Birth Date: | Age: | |
| Name: | | | 2017 AAU # | |
| | | | Phone: () | |
| City: | State: | Zip: | Email Address: | |
| | Not Staying at | One of the Hote | ls Below - \$50 for t | he Clinic! |
| Credit Card # | Expiration: | | | |
| | This clinic is being | sponsored by AAU/U | ISA Karate and the follow | ing hotels: |
| Sheraton Downtown Marriott Downtown | | Courtyard | Holiday Inn Downtown | |

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