

ADIRONDACK ASSOCIATION  
AAU KARATE

# District Championship & National Qualifier

Hudson Valley Community College  
Troy, NY  
May 3, 2025



**Date:** May 3, 2025  
**Location:** Hudson Valley Community College  
McDonough Sports Complex  
Troy, NY 12180  
**Host:** Adirondack Events, District Chair/Regional Director Tony Butler

**Adirondack District Chair/Regional Director**  
Shihan Tony Butler, Jr.  
e-mail: [shihanbutler@gmail.com](mailto:shihanbutler@gmail.com)

- This event is licensed by the Amateur Athletic Union of the U.S., Inc.
- All participants must have a current AAU membership.
- AAU membership may not be included as part of the entry fee to the event
- AAU Youth Athlete membership must be obtained before the competition begins.
- BE PREPARED! Adult and Non Athlete memberships are no longer instant and cannot be applied for at event.
- Please allow at least 10 days for membership to be processed.
- Participants are encouraged to visit the AAU website [www.aausports.org](http://www.aausports.org) to obtain their membership

# AAU ADIRONDACK DISTRICT KARATE CHAMPIONSHIPS

Please Print Clearly

---

Applicant/Athlete (Last Name) (First Name) (Telephone No.)

---

Address City State Zip

Birthdate: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_ Sex:  Male  Female Height: \_\_\_ Ft. \_\_\_ In. Weight: \_\_\_ lbs.  
(mo./day/yr) (\*As of 7/1/25)

(If age is challenged, please be able to produce proof of age, such as a birth certificate, passport, etc.)

---

Dojo/Club Name Sensei's Name 2024-25 AAU Number

## KARATE EXPERIENCE

Check One below:

- Beginner
- Novice
- Intermediate
- Advanced

## I WILL COMPETE IN THE FOLLOWING CATEGORIES

- Kobudo** (Weapons)
- Kata**—16 yr. old or older advanced (3 rounds Shitei/Sentei/Tokui)
- Kata** (all ages & experience levels EXCEPT Adult Advanced)
- Kumite** (sparring)

### Seniors (35 + years) only:

- I am a senior/master and wish to compete in adult group (ages 19-34). Check this box only if you wish to compete in this group.

- = *Beginner* – less than one year of training
- = *Novice* – more than one year, less than two years
- = *Intermediate* – two years, less than four years
- = *Advanced* – four years or more

### Medical Information: check one below

- I have **NO** medical problems
- I have medical problems, but I am able to compete. Describe medical problem(s), or attach doctor's note.

---

## TOURNAMENT FEES:

**\$85.00 Early Bird Registration must be received by 3/31/2025 / \$115.00 Normal Registration must be received by 4/30/2025 / Late Registration \$125.00 5/3/2025 / \$20.00 Each Additional Event**

APPLICATION MUST BE RECEIVED BY 5/01/2025.

MAKE CERTIFIED CHECKS OR MONEY ORDERS PAYABLE TO: AC-TKO.

**E-mail** applications: [senseikristen@gmail.com](mailto:senseikristen@gmail.com) **or Mail to:**  
Sensei Kristen Dawson c/o AC-TKO 3929 NY – 150 West Sand Lake, NY 12196

## **Adult and Minor Athletic Waiver and Release of Liability**

In order for my child(ren) or me to participate in the 2025 AAU Karate Association Championships and Qualifier, I agree to assume the risks incidental to such participation (risks may include, among other things, muscle injuries and broken bones) and, on my own behalf and on behalf of my heirs, executors, and administrators, release and forever discharge the released parties defined below, of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with the participation of my child(ren) or me in such activity and further damages, costs or expenses, including, but not limited to, attorney's fees and disbursements. For this event, the released parties are The Albany Council of Traditional Karate-Do, its officers, its affiliated clubs, regional sports organizations, their respective administrators, directors, agents, coaches and other employees, staff, officials and volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessees of premises used to conduct the event. I understand that this release and indemnity agreement includes any claims based on the negligence, action or inaction of any of the above released parties and covers bodily injury (including death) and property damage, whether suffered by myself or my child(ren), before, during, or after such participation. I declare that I and/or my child(ren) are physically fit, are current 2024-25 AAU members, and have the skill level required to participate in this particular event. I further authorize medical treatment for my child(ren) or myself at my costs, if the need arises. I grant the released parties the right to photograph and/or videotape me and/or my child(ren) and further to use our name, face, likeness, voice and appearance in connection with the exhibitions, publicity, advertising, and promotional materials without reservation or limitation.

### **Liability Waiver**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**(Parent or Guardian's Signature if under 19)** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

# 2025 AAU ADIRONDACK DISTRICT KARATE CHAMPIONSHIPS

## EVENT INFORMATION

## RULES & REGULATIONS

### Tournament

Adirondack District Chair/Regional Director:  
Shihan Tony Butler, Jr

Host: ACTKO  
100 Broadway, Suite #5 Menands, NY

Date: May 3, 2025  
Location: Hudson Valley Comm College  
Start Times: Tournament begins – 8:30 a.m.  
Age: 5-Adult (individual competition)  
Competition: Kata (form), kobudo (weapons) and  
kumite (sparring)

Rules: AAU  
Sanctioned By: Amateur Athletic Union of the U.S.  
**Spectator Fees: Spectator admission: \$5.00 Adults  
\$3.00 Children/under 2 yrs of age Free**

Competitors: Please note: Ages may be combined by  
experience level. This tournament is a  
Qualifier for the National Championships.

### Mandatory Equipment

White Naugahyde/leather fist guards  
(AAU approved)

White foam face headgear with face  
shield (AAU approved) - ages 18 and  
under Groin cup protector (males)  
Mouth guards

### Optional Equipment

White cloth shin pads (adult)  
White cloth shin/instep pads (youth)  
White foam open face headgear  
(adult)

## **DRESS CODE**

THE OFFICIAL AAU KARATE PATCH MUST BE WORN FOR THIS COMPEITION (SEWN ON GI)

BEGINNERS MUST WEAR WHITE BELT

NOVICES MUST WEAR GREEN BELT

INTERMEDIATES MUST WEAR BROWN BELT

ADVANCED COMPETITORS MUST WEAR BLACK BELT

Traditional white gi (no piping or stripes)

No rolled sleeves or cuffs

Pants must be  $\frac{3}{4}$  lengths (between ankle and knee)

Sleeves must be  $\frac{3}{4}$  lengths (between wrist and elbow)

Females must wear plain white T-shirt or white sports bra under top

No headbands or jewelry

### **TOURNAMENT ADDRESS:**

**Hudson Valley Community College  
McDonough Sports Complex  
Troy, New York 12180**

## **TOURNAMENT SCHEDULE**

**May 3, 2025**

**7:00 AM**            **Sign in and registration**  
**8:30 AM**            **Coaches / Referee Meeting**

### **\*STAGING SCHEDULE\***

**9:30 AM**            **KATA, KOBUDO, KUMITE**  
  
                         **All 16 years and older Advanced (male and female)**  
                         **All adult and senior (male and female) Beginner, Novice and Intermediate**

**9:45 AM**            **All 5 – 8 year old male and female Beginners and Novice**

**10:00 AM**           **All 5 – 8-year-old male and female Intermediate and Advanced**

**11:00 AM**           **All 9 – 12-year-old male and female Beginner and Novice**

**12:00 PM**           **All 9 – 12 year old male and female Intermediate and Advanced**

**1:00 PM**            **All 13 – 18 year old Beginner and Novice male and female**

**2:00 PM**            **All 13 – 15 year old Intermediate and Advanced**

**All TEAM Competitors**

**We reserve the right to combine Divisions**

**\*Times may vary slightly on the actual day of competition.**

**AWARDS: Medals to the top 3 (Gold / Silver / Bronze)**  
**Kumite: Double Thirds**

## 2025 Adirondack Association Karate Championships TEAM APPLICATION

TEAM NAME: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

**WE WILL PARTICIPATE AS A:**

- |   |  |
|---|--|
| <input type="checkbox"/> Pee Wee Team ( <i>Ages 5-8</i> )       | <input type="checkbox"/> <i>Junior</i> Team ( <i>Ages 9-12</i> ) |
| <input type="checkbox"/> Youth Team ( <i>Ages 13-15</i> )       | <input type="checkbox"/> <i>Teen</i> Team ( <i>Ages 16-18</i> )  |
| <input type="checkbox"/> Collegiate Team                        | <input type="checkbox"/> Adult Team ( <i>Ages 19-34</i> )        |
| <input type="checkbox"/> Senior/Master Team ( <i>Ages 35+</i> ) |  |

**THIS TEAM CONSISTS OF:**

- All Male Members       All Female Members       Combined \*

**THIS TEAM WILL COMPETE IN THE FOLLOWING EVENTS:**

- Kobudo       Kata       Kumite (Sanbon)

**PLEASE NOTE:**

1. Team participation level is determined by the age of the OLDEST Team Member (kata / kobudo)
2. All members of a kumite team **Must be the same sex and in the same age category**
3. Team Members MAY NOT compete in multiple levels (*i.e. Collegiate and Adult*)
4. \* Under 19 may combine sexes in Teams in Kobudo and Kata ONLY!!

**Fees Owed: \$35.00 for all Events**

\_\_\_\_\_ One Event  
 \_\_\_\_\_ Two Events  
 \_\_\_\_\_ Three Events  
 \$ \_\_\_\_\_ Total Fees Paid

NAME	2024-25 AAU #	AGE
1.		
2.		
3.		

### Adult and Minor Athletic Waiver and Release of Liability

In order for my child(ren) or me to participate in the 2025 AAU Karate Association Championships and Qualifier, I agree to assume the risks incidental to such participation (risks may include, among other things, muscle injuries and broken bones) and, on my own behalf and on behalf of my heirs, executors, and administrators, release and forever discharge the released parties defined below, of and from all liabilities, claims, actions, damages, costs or expenses of any nature arising out of or in any way connected with the participation of my child(ren) or me in such activity and further damages, costs or expenses, including, but not limited to, attorney’s fees and disbursements. For this event, the released parties are The Albany Council of Traditional Karate-Do, its officers, its affiliated clubs, regional sports organizations, their respective administrators, directors, agents, coaches and other employees, staff, officials and volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessees of premises used to conduct the event. I understand that this release and indemnity agreement includes any claims based on the negligence, action or inaction of any of the above released parties and covers bodily injury (including death) and property damage, whether suffered by myself or my child(ren), before, during, or after such participation. I declare that I and/or my child(ren) are physically fit, are current 2024-25 AAU members, and have the skill level required to participate in this particular event. I further authorize medical treatment for my child(ren) or myself at my costs, if the need arises. I grant the released parties the right to photograph and/or videotape me and/or my child(ren) and further to use our name, face, likeness, voice and appearance in connection with the exhibitions, publicity, advertising, and promotional materials without reservation or limitation.

\_\_\_\_\_  
Signature of Competitor

\_\_\_\_\_  
Signature of Parent/Guardian (if under age 19)