

# 31st Annual Western Montana Karate Classic



**Round Robin Fighting**

**\$100 Prize for Black Belt Forms  
And Fighting Grand Champions!**

**APRIL 22, 2017**

**Hosted By**

Chris and Pattie Crews  
4076 Old Petty Creek RD.  
Alberton, MT. 59820  
(406) 864-2171

**Tournament Location**

Valley Christian School  
2526 Sunset Lane  
Missoula, MT

Tournament maps, registration forms, and information will be updated periodically on

[www.missoulakenpo.net](http://www.missoulakenpo.net)

# 31st ANNUAL WESTERN MONTANA KARATE CLASSIC

We want to welcome all competitors, officials, their families and friends to our 31st Annual Western Montana Karate Classic. We wish you the best of luck in this tournament season. Lunch will be available for all judges. All appointed center judges will be paid \$50.00.

*-Chris and Pattie Crews*

## TOURNAMENT INFORMATION

**DATE:** April 22, 2017  
**CITY/STATE:** Missoula, Montana  
**LOCATION:** Valley Christian School  
2526 Sunset Lane  
Missoula, MT  
**PROMOTER:** Chris and Pattie Crews  
**INFORMATION ADDRESS:** 4076 Old Petty Creek Rd.  
Alberton, MT 59820  
**PHONE:** (406) 864-2171  
**HOTEL:** Ruby's Inn  
4825 North Reserve St  
1-800-221-2057 or 1-406-721-0990  
**Rate:** \$79.00 + Tax Doubles  
*(Reserve by April 15)*  
Block reserved under "Western Montana Karate Classic"  
**AWARDS:** 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> Place Trophies in all divisions  
**G.C. AWARDS** \$100.00 Black Belt Kata and Black Belt Sparring  
**RULES:** 1 point hands and groin  
1 point kicks  
Sparring 1 minute rounds; Round Robin  
Safety equipment required

## SCHEDULE OF EVENTS

**7:30 A.M.** .....Registration  
**8:30 A.M.** .....Judges Meeting (All Brown and Black Belts Please Attend)  
**9:00 A.M.** .....Eliminations begin

*We will be using our new website for our entry forms, please put your e-mail address on your entry form so we can e-mail the tournament info to you. Further info, maps, etc. will be available online as the tournament moves closer. Please check in at our web page at [www.missoulakenpo.net](http://www.missoulakenpo.net).*

# 2017 Montana Karate Classic Divisions

*\*These black belt divisions will compete for Grand Champion in their respective areas*

UNDER BELT DIVISIONS					BLACK BELT DIVISIONS				
Sparring	Forms			Rank	Sex	Forms			Sex
S1	K1	6- Under	All		M/F	BK1	13 -Under	All Styles	M/F
S2	K2	7 to 8	Nov	W Y O	M/F	BK2	14 to 17	All Styles	M/F
S3	K3	7 to 8	Int	P Bl	M/F	BK3*	18+	All Styles	M/F
S4	K4	7 to 8	Adv	G Br	M/F	<b><u>Self-Defense</u></b>			
S5	K5	9 to 10	Nov	W Y O	M/F	BSD1	17-Under		M/F
S6	K6	9 to 10	Int	P Bl	M/F	BSD2*	18+		M/F
S7	K7	9 to 10	Adv	G Br	M/F	<b><u>Weapons</u></b>			
S8	K8	11 to 13	Nov	W Y O P	M/F	BW1	13-Under		M/F
S9	K9	11 to 13	Int/Adv	Bl G Br	M/F	BW2	14 to 17		M/F
S10	K10	14 to 17	Nov	W Y O P	M/F	BW3*	18+		M/F
S11	K11	14 to 17	Adv	Bl G Br	M/F	<b><u>Sparring</u></b>			
S12	K12	18+	All		M/F	BS1	13-Under		M/F
S13	K13	35+	All		M/F	BS2	14 to 17		M/F
<b><u>Self-Defense</u></b>						BS3*	18+		M/F
SD1		13-Under	All		M/F	BS4*	35+		M/F
SD2		14 to 17	All		M/F	<b><u>OTHER DIVISIONS</u></b>			
SD3		18+	All		M/F	<b><u>Showmanship</u></b>			
<b><u>Weapons</u></b>						M1	All		M/F
W1		10-Under	Nov	W Y O P	M/F				
W2		10-Under	Adv	Bl G Br	M/F				
W3		11 to 13	Nov	W Y O P	M/F				
W4		11 to 13	Adv	Bl G Br	M/F				
W5		14 to 17	Nov	W Y O P	M/F				
W6		14 to 17	Adv	Bl G Br	M/F				
W7		18+	All		M/F				
<b><u>Flag-Sparring</u></b>									
F1		6-Under	All		M/F				
F2		7 to 8	Nov	W Y O	M/F				
F3		7 to 8	Int	P Bl	M/F				
F4		7 to 8	Adv	G Br	M/F				
F5		9 to 10	Nov	W Y O	M/F				
F6		9 to 10	Int	P Bl	M/F				
F7		9 to 10	Adv	G Br	M/F				
F8		11 to 13	Nov	W Y O P	M/F				
F9		11 to 13	Adv	Bl G Br	M/F				
<b><u>BLACK BELT DIVISIONS</u></b>									
Grand Champion Forms				\$100.00					
Grand Champion Sparring				\$100.00					
<b><u>Rank Break Down</u></b>									
W-White		P-Purple		Br-Brown					
Y-Yellow		Bl-Blue							
O-Orange		G-Green							

***Divisions may be split or combined as necessary.***

NAME: _____			RANK: _____		
STYLE: _____			PHONE: (____) _____		
ADDRESS: _____			CITY: _____		ST: _____
ZIP: _____	AGE: _____	BIRTH DATE: ____/____/____	M/F: _____	WEIGHT: _____	
TEAM NAME: _____			INSTRUCTOR: _____		
SCHOOL: _____			E-MAIL: _____		

**CONSENT RELEASE**

*I, (print name) \_\_\_\_\_, THE UNDERSIGNED, DO HEREBY RELEASE THE PROMOTERS, COMMISSIONERS, ARBITRATORS, AND ANY AND ALL OTHER PERSONS ASSOCIATED WITH THIS EVENT IN ANY CAPACITY FROM ANY LIABILITY DUE TO INJURIES ETC. THAT I MAY INCUR AS A RESULT OF MY ATTENDANCE AN/OR PARTICIPATION AT THIS EVENT. FURTHERMORE, I HEREBY PERMANENTLY WAIVE ANY COMPENSATION WHATSOEVER FOR THE USE OF PICTURES, VIDEOS, MEDIA COVERAGE, ETC. UNLISTED BY THOSE ASSOCIATED WITH THIS EVENT WHICH MAY BE USED FOR PROFIT MAKING PURPOSES. I CLEARLY UNDERSTAND THAT THE FIGHTING ASPECT OF THIS SPORT AND COMPETITION INVOLVES BODILY CONTACT. I HAVE READ, UNDERSTAND AND AGREE TO ABIDE BY THE RULES AND ASSUME FULL RESPONSIBILITY AND ANY ASSOCIATED LIABILITY FOR INFRINGEMENT OF SUCH RULES. ADDITIONALLY, I AM FULLY AWARE MY PERSONAL MEDICAL CONDITION AND HEREBY CERTIFY THAT I AM MENTALLY AND PHYSICALLY FIT TO COMPETE AT THIS TOURNAMENT.*

\_\_\_\_\_  
COMPETITORS SIGNATURE

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN  
THAT ASSUMES COMPLETE RESPONSIBILITY

**LIST DIVISIONS ENTERING**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**COMPETITOR & SPECTATOR FEES: (Please fill out completely)**

	<b><u>PRE-REGISTRATION</u></b> <small><i>Postmarked by 4/15/17</i></small>	<b><u>AT THE DOOR</u></b> <small><i>or after 4/15/17</i></small>
FIRST EVENT	X \$45.00 _____	X \$55.00 _____
EACH ADDITIONAL	X \$ 8.00 _____	X \$12.00 _____
SPECTATOR (5&↓, 65&↑ free)	X \$ 6.00 _____	X \$ 8.00 _____
<b>*POSITIVELY NO REFUNDS*</b>	TOTAL = _____	TOTAL = _____

**Payment Methods Accepted**

For pre-registration: Personal/Business Check, Certified Cashiers Check, or Money Order. Make payable to Chris Crews. Send Pre-registration form & payment to: Chris Crews 4076 Old Petty Creek Rd. Alberton, MT. 59820. Registration with NSF's will be held at Registration Desk and must be paid in cash at the door. NO REFUNDS.

**Judges:** Please fill in the information below. *Report to the Black Belt meeting @ 8:30 am.*  
Thank you in advance for all of your help and consideration, you're a vital asset to this event!

Are you competing? Yes\_\_\_ No\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_  
Style \_\_\_\_\_ Years as a Black Belt \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_