



# U.S. Association of Martial Artists

## Grand Nationals Tournament & Seminar Symposium

March 7 - 8, 2026 \* \* Albuquerque, New Mexico

Must be Postmarked by February 21, 2026 to be "Pre-Registered," after that they are "At Door" Registrations.



### Entry Form

NAME \_\_\_\_\_ Competitor's AGE on March 7, 2026 \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TIME IN MARTIAL ARTS: \_\_\_\_\_ YEARS \_\_\_\_\_ MONTHS \_\_\_\_\_ SEX <sup>Circle</sup> M / F PHONE: \_\_\_\_\_

\*USAMA MEMBER # \_\_\_\_\_ BELT RANK (Color, or Dan Level, if applicable): \_\_\_\_\_

SCHOOL \_\_\_\_\_ INSTRUCTOR \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**Please Register me for the following:**

\_\_\_\_\_ Forms (Kata) Special Needs? ☐

\_\_\_\_\_ Sparring (Kumite)

\_\_\_\_\_ Weapons (Kobudo)

\_\_\_\_\_ Chanbara

\_\_\_\_\_ TDS (Take Down Sparring)

### COMPETITOR EVENTS:

Pre-Registered Postmarked by Feb. 21st	At Door
One or Two Events \$129	\$145
Three or Four Events \$139	\$155
Five Events \$149	\$165

Scan Code  
Below to  
Register  
Online



Total for Individual Events: \$ \_\_\_\_\_

**Waiver:** I understand that karate is a contact sport. I am aware that I am participating in an activity which involves physical contact and injuries may occur which may potentially involve Covid & other virus contact, bodily harm or even death and do so at my own risk. I waive any claim or cause of action I may have against the promoters of the tournament, Sue Hawkes, the Isleta Resort & Casino, the judges, tournament personnel, other competitors, seminar instructors, and the U.S. Association of Martial Artists Inc. that may arise out of my participation in this tournament and/or seminars. I further agree to indemnify and hold harmless the promoter, Sue Hawkes, the Isleta Resort & Casino, the judges, tournament personnel, seminar instructors, and the U.S. Association of Martial Artists Inc., for any injuries, sickness, Covid & other viruses, or damages which may arise due to my participation in the tournament and/or seminars. I state that I do not suffer from Covid or any virus symptoms, and/or physical and/or mental conditions which may affect my participation in this tournament. I further agree to conduct myself in a sportsmanlike and safe manner and understand if I fail to do so, I may be disqualified from the tournament and not entitled to a refund. I also hereby give permission to medical personnel to administer First Aid or Emergency Treatment if, in their opinion, it becomes necessary. I hereby grant the U.S. Association of Martial Artists, Inc. ("USAMA") permission to use my likeness in a photograph, video, or other digital media ("photos") in any and all of its publications, including web-based publications, without payment or other consideration. I understand and agree that all photos will become the property of the USAMA. I agree to comply with the local public health orders. I understand that the event schedule is subject to change to comply with public health orders. I realize no refunds will be given for this event.

Competitor's Waiver Signature \*\* \_\_\_\_\_ Date \_\_\_\_\_

\*\* (Parent or guardian must sign if under 18)

Total for Individual Competitor Events ..... Total: \$ \_\_\_\_\_

USAMA Members: ..... <Discount> ..... \*Current USAMA Member Competitor Discount **(\$10.00)** Less: \$ - \_\_\_\_\_

Number of **One Day** Spectator Passes (4 to 9 yrs.) \_\_\_\_\_ X \$5.00 Circle One: **Sat.** or **Sun.** ..... Total: \$ \_\_\_\_\_

Number of **One Day** Spectator Passes (10 yrs. & up) \_\_\_\_\_ X \$20.00 Circle One: **Sat.** or **Sun.** ..... Total: \$ \_\_\_\_\_

Number of **Two Day** Spectator Passes (4 to 9 yrs.) \_\_\_\_\_ X \$10.00 ..... Total: \$ \_\_\_\_\_

Number of **Two Day** Spectator Passes (10 yrs. & up) \_\_\_\_\_ X \$30.00 ..... Total: \$ \_\_\_\_\_

Number of **Two Day Video Passes** (Includes Spectator Fee) (Allows Limited Ring-Side Access Except During Finals) \_\_\_\_\_ X \$45.00 Total: \$ \_\_\_\_\_

Seminar Fee **Jeff Crothers: Aware & Prepared.** ... (Pre-Registered \$45) ... (\$50 At Door) ..... X \$45.00 Total: \$ \_\_\_\_\_

**Adult Banquet Tickets** ..... # of Tickets \_\_\_\_\_ X \$55 = Total: \$ \_\_\_\_\_

(Banquet Tickets Must be Purchased by Feb. 21st! ..... **NO Banquet Tickets Available at Door**)

**Child Banquet Tickets** .... (9 yrs. & under only) ..... # of Tickets \_\_\_\_\_ X \$25 = Total: \$ \_\_\_\_\_

Payment Enclosed: (Make Check or Money Order Payable to "USAMA") ... (No Checks at Door) ..... **Total: \$** \_\_\_\_\_



\* Credit Card Payments\* & Registrations Accepted Online for security at [www.usamartialartists.org](http://www.usamartialartists.org)