

# Elaine Yamano's YUKAN NA SAMURAI

OPEN MARTIAL ARTS TOURNAMENT  
SATURDAY, JULY 27TH, 2024  
THE TROPICANA: 2121 SOUTH CASINO DRIVE • LAUGHLIN, NV 89029

- Pre-Register for Special Discounted Entry Fee
- Grand Champion awards: Adult & Jr. Black Belt Kata & Adult Male Black Belt Kumite
- Special Event for ALL Kids in Attendance
- Beautiful Awards • First Timers Divisions

For more info on tournament and Hotels scan QR or visit [www.yukannasamurai.com](http://www.yukannasamurai.com)



**SIGNATURES:** \_\_\_\_\_  
**PARTICIPANT** \_\_\_\_\_  
**PARENT/GUARDIAN/INSTRUCTOR** \_\_\_\_\_

DATE \_\_\_\_\_ DATE \_\_\_\_\_

**SAFETY EQUIPMENT MANDATORY**  
 MOUTHPIECE, GROIN CUP, FOOTPADS, GLOVES, HEADGEAR, BREAST PADS (FEMALES)

**SPECIAL NOTE:** ALL CONTESTANTS MUST BE CERTIFIED AS QUALIFIED FIGHTERS BY THEIR INSTRUCTORS. SCHOOL INSTRUCTORS MUST ASSUME FULL RESPONSIBILITY OF HIS/HER FIGHTER'S ABILITY.

**I, THE UNDERSIGNED, DO HEREBY ASSUME ALL RISKS OF PERSONAL INJURY** while attending, traveling to and/or from, participating in said tournament, and acting for myself, my heirs, personal representatives, and assigns, do hereby release the property owner, manager, landlord, host, sponsors, tournament officials, and the officers agents, and representatives of said organizations taking part, individually and collectively, from all liability, including claims against and suits at law or in equity for any injury, fatal or otherwise, which may result directly or otherwise from my traveling to, participating in, or returning from said contest. I further fully understand that if I am under 18 years of age, this application must be signed by my parent, legal guardian, or instructor (18 years old or over).

*Please fill out front and back. Cut on dotted line and mail this form in.*

**ENTRY FEES:**  
 One Event \$50  
 Two Events \$55  
 Three Events \$60  
 Spectator Fee: Kids \$9 • Adults \$14  
 (Taxes and fees not included)

**PRE-REGISTRATION:**  
 \$50 UNLIMITED  
 EVENTS  
 DEADLINE 07/13/24

**Make Money Order or Checks Payable to:**  
 Elaine Yamano  
 Form must be Postmarked by: 07/13/24  
 send with pre-Registration form to:  
 Elaine Yamano  
 2315 Sierra St.  
 Torrance, Ca. 90501



# SONS OF THE PACIFIC . DIVISION BREAKDOWN

NO.	AGE	GROUP	RANK
<b>SELF DEFENSE</b>			
01	17 & UNDER	MALE/FEMALE	WHITE TO GREEN
02	18 & UP	MALE/FEMALE	WHITE TO GREEN
03	17 & UNDER	MALE/FEMALE	BROWN TO BLACK
04	18 & UP	MALE/FEMALE	BROWN TO BLACK
<b>HANDICAPABLE KATA &amp;/OR WEAPONS DIVISIONS</b>			
05	ALL AGES	MALE/FEMALE	WHITE TO BROWN
06	ALL AGES	MALE/FEMALE	BLACK
<b>SHOWMANSHIP DIVISIONS (W/ MUSIC OK - 4MIN)</b>			
07	ALL AGES	MALE/FEMALE	WHITE TO BROWN
08	ALL AGES	MALE/FEMALE	BLACK
<b>BREAKING DIVISIONS</b>			
09	18 & UP	MALE/FEMALE	WHITE TO BROWN
10	18 & UP	MALE/FEMALE	BLACK
<b>WEAPONS (FORMS) DIVISIONS</b>			
11	5-12	MALE/FEMALE	WHITE TO GREEN
12	13-17	MALE/FEMALE	WHITE TO GREEN
13	17 & UNDER	MALE/FEMALE	BROWN TO RED
14	17 & UNDER	MALE/FEMALE	BLACK ★
15	18 & UP	MALE/FEMALE	WHITE TO GREEN
16	18 & UP	MALE/FEMALE	BROWN
17	18 & UP	MALE/FEMALE	BLACK 🏆
<b>KATA (FORMS) DIVISIONS</b>			
18	5 & UNDER	MALE/FEMALE	WHITE TO BROWN
19	6-9	MALE/FEMALE	WHITE/YELLOW/ORANGE
20	6-9	MALE/FEMALE	PURPLE/BLUE/GREEN
21	10-12	MALE/FEMALE	WHITE/YELLOW/ORANGE
22	10-12	MALE/FEMALE	PURPLE/BLUE/GREEN
23	12 & UNDER	MALE/FEMALE	BROWN TO RED
24	12 & UNDER	MALE/FEMALE	BLACK
25	13-17	MALE/FEMALE	WHITE/YELLOW/ORANGE
26	13-17	MALE/FEMALE	PURPLE/BLUE/GREEN
27	13-17	MALE/FEMALE	BROWN TO RED
28	17 & UNDER	MALE/FEMALE	BLACK ★
29	18 & UP	MALE/FEMALE	WHITE/YELLOW/ORANGE
30	18 & UP	MALE/FEMALE	PURPLE/BLUE/GREEN
31	18 & UP	MALE/FEMALE	BROWN
32	18-34	MALE	BLACK 🏆
33	18-34	FEMALE	BLACK 🏆
34	35-49	MALE/FEMALE	BLACK 🏆
35	50 & UP	MALE/FEMALE	BLACK 🏆

NO.	AGE	GROUP	RANK
<b>KUMITE (SPARRING) DIVISIONS</b>			
36	5 & UNDER	MALE/FEMALE	ALL
37	6-7	MALE/FEMALE	WHITE/YELLOW/ORANGE
38	6-7	MALE/FEMALE	PURPLE/BLUE/GREEN
39	6-7	MALE/FEMALE	BROWN TO BLACK
40	8-9	MALE	WHITE/YELLOW/ORANGE
41	8-9	FEMALE	WHITE TO GREEN
42	8-9	MALE	PURPLE/BLUE/GREEN
43	8-9	MALE	BROWN TO BLACK
44	10-12	MALE	WHITE/YELLOW/ORANGE
45	10-12	FEMALE	WHITE TO GREEN
46	10-12	MALE	PURPLE/BLUE/GREEN
47	10-12	MALE	BROWN TO BLACK
48	12 & UNDER	FEMALE	BROWN TO BLACK
49	13-14	FEMALE	WHITE TO BLUE
50	13-14	FEMALE	GREEN TO BROWN
51	13-14	FEMALE	BLACK
52	13-15	MALE	WHITE/YELLOW/ORANGE
53	13-15	MALE	PURPLE/BLUE/GREEN
54	13-15	MALE	BROWN
55	13-15	MALE	BLACK
56	15-17	FEMALE	WHITE TO BLUE
57	15-17	FEMALE	GREEN TO BROWN
58	15-17	FEMALE	BLACK
59	16-17	MALE	WHITE/YELLOW/ORANGE
60	16-17	MALE	PURPLE/BLUE/GREEN
61	16-17	MALE	BROWN
62	16-17	MALE	BLACK
63	18 & UP	FEMALE	WHITE TO BROWN
64	18-34	FEMALE	BLACK ♂
65	18-30	MALE	WHITE/YELLOW/ORANGE
66	18-30	MALE	PURPLE/BLUE/GREEN
67	18-30	MALE	BROWN
68	18-30	MALE	BLACK (LIGHT 150) ♂
69	18-30	MALE	BLACK (MED 151-170) ♂
70	18-30	MALE	BLACK (HEAVY 171+) ♂
71	31-39	MALE	WHITE TO GREEN
72	31-39	MALE	BROWN
73	31-39	MALE	BLACK ♂
74	35 & UP	FEMALE	BLACK ♂
75	40 & UP	MALE	WHITE TO BROWN
76	40-49	MALE	BLACK ♂
77	50 & UP	MALE	BLACK ♂

♂ COMPETES FOR MEN'S KUMITE GRAND CHAMPION

🏆 COMPETES FOR KATA GRAND CHAMPION

★ COMPETES FOR KATA JR GRAND CHAMPION

♂ COMPETES FOR WOMEN'S KUMITE GRAND CHAMPION

(a minimum of 3 competitors in each division 64 & 74)

**Sons of the Pacific reserves the right to make changes in any divisions. For the purpose of fairness, Sons of the Pacific will take into account height, weight, rank and age as a determining factor in splitting a division. Divisions with large entries will be split.**

## Sons of the Pacific

\_\_\_\_ Logged

### Event Division Registration

No. of Events

Entered: \_\_\_\_\_

Circle the event number(s) you are entering as listed on the Divisions sheet.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19

20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38

39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57

58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77

Male \_\_\_\_\_

Female \_\_\_\_\_

Rank \_\_\_\_\_

Weight \_\_\_\_\_

NAME \_\_\_\_\_ AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ TELEPHONE ( ) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

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

DOJO NAME \_\_\_\_\_ TELEPHONE ( ) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

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

INSTRUCTOR \_\_\_\_\_ STYLE \_\_\_\_\_