

MKA 2026 Registration

Student's Name *

Sam Sample S

First Name

Sample

S

Last Name

Middle Name

Returning Member? *

New Member
 Returning Member

If you have an existing MKA membership card, please enter the number here

Birthday *

01/25/2006

MM/dd/yyyy

Please note, the age of the member on the day of the first competition is the age group that is used for the entire season.

Sex

Male
 Female

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Address *

1234 anyplace

Street Address

Address Line 2

anytown

ms

City

State/Region/Province

12345

Postal / Zip Code

If under the age of 18, Please enter Parent/Guardian's name

Mrs.

jane

doe

Title

First Name

Last Name

Phone *

1234567890

Email *

josh3955@gmail.com

This is extremely critical, please double check your entry is valid as we use this to communicate champions at the end of the season. Parents, we suggest using your email.

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Tell us about your Karate Experience *

School	
Name of School *	cobra kai
Instructor's Name *	lawrence
City/State the School is located *	anytown

Matrix Choice *

Belt/Rank *	
What Belt Rank Are You? *	Blue - Beginner

Terms and Conditions *

By selecting the box, I agree to abide by the decorum of good sportsmanship and the Rules and Bylaws of the MKA located on our website, <https://www.mskarateassociation.com>.

I accept the Terms and Conditions.

01/07/2026

MM/dd/yyyy

Check here if you would like to be contacted

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Where did you hear about the MKA?

the internet

Annual Dues are set at \$35. As a benefit, MKA members are granted a \$5 discount on all MKA sanctioned tournaments during the season.

You can use the selection below to pay electronically via PayPal (\$2 service charge applies), provide payment at the first competition, or mail a check/money order to:

**MKA
PO Box 121
Pascagoula, MS 39567**

Payment Method *

- Pay now via PayPal (\$2 fee applies)
- Pay at Competition
- Pay by Mail

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