



***PARA-KARATE  
KATA COMPETITION RULES***



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COMPETITION RULES  
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## **PARA-KARATE KATA COMPETITION RULES**

### **1. COMPETITION AREA**

1. The competition area must be flat and devoid of hazard.
2. The competition area must be of sufficient size to permit the uninterrupted performance of the Kata.
3. The whole competition area must be without any form of barrier
4. There must be one changing room for male and one for female; the doors to them must be at least 1 metre; there must be a treatment couch for the wheelchair user to change their clothing
5. In any unforeseen incident, such as extra testing, doping control, fire, case of evacuation, the national coaches are responsible for their athletes

#### **EXPLANATION:**

- I. For the proper performance of Kata a stable smooth surface is required. Usually, the matted Kumite areas will be suitable.
- II. Athletes must have the opportunity to come to the hall, extra testing rooms, doping controls, the warm up area, dressing area, the toilets and spectators' area.

### **2. OFFICIAL DRESS**

1. Contestants and Judges must wear the official uniform as defined in Appendix 7 and 9 of the WKF Kata and Kumite Competition Rules.
2. Any person who does not comply with this regulation may be disbarred.
3. During the first rounds, female competitors have to wear a red belt and male competitors have to wear a blue belt
4. In the finals one competitor will have to wear a red belt, and the other a blue belt

#### **EXPLANATION:**

- I. The karate-gi jacket may not be removed during the performance of the Kata.
- II. Contestants who present themselves incorrectly dressed will be given one minute in which to remedy the situation.

### **3. ORGANISATION OF KATA COMPETITION**

1. Kata competition takes the form of individual bouts. An individual Kata bout consists of an individual performance in separate male and female divisions.
2. There must be at least 4 athletes registered per category in order for the category to be present at the Championships.
3. Each National Federation can register a maximum of 4 athletes per category
4. A point system with best score ranking will apply.
5. Slight variations as taught by the contestant's style (ryu-ha) of Karate will be permitted.
6. The score table will be notified of the choice of Kata prior to each round.
7. Contestants can perform the same Kata in each round.
8. The score table will be entered before the tournament, and it will consist of classification information along with the corresponding number of additional points for each competitor, according to the official list of competitors.
9. In the bouts for medals the competitors will perform their chosen Kata in the usual way.



10. The best two in each group at the first round will form a new pool for the finals
11. The medals will be awarded in the usual way

EXPLANATION:

- I. The two best of each pool (first of pool A and second of pool A; together with first of pool B and the second of pool B - will go to final and form pool C). As a result, there will be one gold medal, one silver medal and one bronze medal.

### 3.1. CLASSIFICATION

There are three Categories for individual Kata:

- Wheelchair Users
- Blind or Visually Impaired
- Intellectually Impaired

### 3.2. CLASSIFICATION SYSTEM

Competitors are considered to be eligible for the competition if they are classified according to the ICD (International Classification of Diseases) and ICF (International Classification of Function), the internationally accepted standard diagnostic tool of the WHO (World Health Organisation).

At the event itself an extra testing takes place by designated ICF experts, one national coach has to be with the athlete all the time.

ICD, ICF and extra testing at the Competition are tools to provide more accurate differentiations in each category.

In order to participate, the National Federations must include on the online WKF registration system the medical certificates of the athletes (Appendix 1), as well as the necessary Therapeutic Use Exemptions approved by the corresponding national anti-doping organisation.

The manifestation of disabilities in each category is marked with the following colours: red, yellow, green and blue.

Every code covers a manifestation of disability, as below:

- Red- Level: Severe level of disability
- Yellow-Level: moderate level of disability
- Green- level: minor level of disability
- Blue-level: lowest level of disability

EXPLANATION:

- I. An athlete being in the “red-level” category of visual impairment will have to wear a black mask over his eyes



## **RECLASSIFICATION PROCEDURE**

An official WKF classifier or doctor may reclassify athletes at any time during the competition.

In the case of an athlete being reclassified during the competition, or because of a complaint, or by the decision of the classifier, the extra points achieved in the competition will be added to points that correspond to the newest assessment made by the official WKF classifier.

If an athlete is suspected to have intentionally deceived the classifier, they will be disqualified immediately.

### **3.3. ICD CLASSIFICATION**

The ICD (International Classification of Diseases) is an internationally accepted standard diagnostic tool of the WHO (World Health Organization). The relevant version is ICD-10 (the guideline for this work).

Therefore the ICF (International Classification of Functioning) should be called into use. This could be created by therapists, doctors, or expert medical staff.

#### **WHEELCHAIR USER**

*Grading according to ICD-10:*

- S 14.: Injury of nerves and spinal cord at neck level
- S 14.7!: Level of injury
- S 24.: Injury of nerves and spinal cord at thorax level
- S 24.7!: Level of injury
- S 34.: Injury of nerves and lumbar spinal cord at abdomen, lower back and pelvis level
- S 34.7!: Level of injury
- T 05.: Traumatic amputations involving multiple body regions
- T 05.3: Traumatic amputation of both feet
- T 05.4: Traumatic amputation of one foot and other leg
- T 05.5: Traumatic amputation of both legs

**No amputation appliance allowed.**

#### **BLIND AND VISUALLY IMPAIRED**

*Grading according to ICD-10:*

- H 53: Visual Disturbances
- H 54: Visual Impairment including blindness (binocular or monocular)
  - H 54.0 Blindness, binocular (on both eyes)
  - H 54.1 Severe visual impairment, binocular
  - H 54.2 Moderate visual impairment, binocular
  - H 54.4 Blindness, monocular (on one eye)
  - H 54.5 Severe visual impairment, monocular
  - H 54.6 Moderate visual impairment, monocular



*Category/Grade:*

- a) Moderate visual impairment: Distance visual acuity worse than 6/18 to 6/60
- b) Severe visual impairment: Distance visual acuity worse than 6/60 to 3/60
- c) Blindness: Distance visual acuity worse than 3/60 to 1/60
- d) Blindness: Distance visual acuity worse than 1/60 to light perception
- e) Blindness: No light perception

**INTELLECTUALLY IMPAIRED**

*Grading according to ICD-10:*

- F 70: 0 Impairment minor (IQ 50-69)
- F 71: 0 Moderately Impaired (IQ 35-49)
- F 81: 9 Developmental disorder by academic skills
- F 82: 0 Developmental disorder by motor function
- F 90: 0 Hyperkinetic disorders
- Q 90:0 Down Syndrome

*Grading according to ICF (ICF version 2005):*

- Classification of body functions (chapter b)
- Classification of body structure (chapter s)
- Classification of activities/participation (Chapter d)
- Classification of environmental factors (chapter e)
- Classification of activities/participation (chapter d)

d 1 learning and applying knowledge:

- d 110: watching
- d 115: listening
- d 130: copying
- d 155: learning to calculate
- d 160: focusing attention

d 2 general tasks and demands:

- d 220: undertaking multiple tasks
- d 240: handling stress / other psychological demands

d 4 mobility:

- d 450: walking
- d 455: moving around



d 5 self-care:

- activity of daily living (dressing, eating, drinking, toileting,...) general assessment

d 6 domestic life:

- Acquiring of goods and services

**Characteristics**

- XXX.0: impairment inexistent (without, not,...) 0-4 %
- XXX.1: impairment simple distinctive (fragile, remote,...) 5-24 %
- XXX.2: impairment moderately distinctive (middle, quite,...) 25- 49 %
- XXX.3: impairment gravely distinctive (heavy, extreme,...) 50- 95 %
- XXX.4: impairment completely distinctive (massive, full,...) 96- 100 %

**3.4. POINT SYSTEM / SCORING**

1. Extra Point system:

After the categorisation of the degree of disability by the ICD, ICF, and extra consideration, up to 3 extra points will be added to the Referee evaluation respectively, taking into account exclusively the degree of disability:

- Red-level: 3 extra points
- Yellow-level: 2 Extra points
- Green-level: 1 Extra point
- Blue-level: 0 Extra point

2. Seven Referees judge the Katas taking into account two criteria, according to the point system:

- Technical evaluation
- Evaluation for demonstration of the Kata

3. Scoring average in:

- First round: 7,0
- Finals: 8,0

4. The highest and lowest score of the two evaluations do not count

EXPLANATION:

- I. TECHNICAL: speed, focus, kime, rhythm, movement, stability
- II. FUNCTIONALITY: good embusen, wheelchair manipulation, fluidity of techniques

**4. REFEREES**

1. None of the referees must belong to the same nationality as the athlete on the tatami
2. The referees must be trained specifically by the WKF Referee Commission Chairman for the Para-Karate competition

**5. KATA PERFORMED**

1. The Kata is freely selectable from the Kata list.
2. Deviations may be acceptable due to the type of disability

**EXPLANATION:**

- I. Any kata from the official kata list may be performed.

Anan	Jion	Papuren
Anan Dai	Jitte	Passai
Annanko	Jyuroku	Pinan 1-5
Aoyagi	Kanchin	Rohai
Bassai Dai	Kanku Dai	Saifa (Saiha)
Bassai Sho	Kanku Sho	Sanchin
Chatanyara Kushanku	Kanshu	Sanseiru
Chinte	Kosokun (Kushanku)	Sanseru
Chinto	Kosokun (Kushanku) Dai	Seichin
Enpi	Kosokun (Kushanku) Sho	Seienchin
Fukyugata 1-2	Kosokun Shiho	Seipai
Gankaku	Kururunfa	Seirui
Garyu	Kusanku	Seisan (Seishan)
Gekisai (Geksai) 1-2	Matsumura Rohai	Shinpa
Gojushiho	Matsukaze	Shinsei
Gojushiho Dai	Matusumura Bassai	Shisochin
Gojushiho Sho	Meikyo	Sochin
Hakucho	Myojo	Suparinpei
Hangetsu	Naifanchin (Naihanshin) 1-3	Tekki 1-3
Haufa	Nijushiho	Tensho
Heian 1-5	Nipaipo	Tomari Bassai
Heiku	Niseishi	Useishi (Gojushiho)
Ishimine Bassai	Ohan	Unsu (Unshu)
Itosu Rohai 1-3	Pachu	Wankan
Jiin	Paiku	Wanshu

**5.1. DISQUALIFICATION**

A competitor or a team of competitors may be disqualified for any of the following reasons:

- a) Failing to bow at the beginning and completion of the kata performance.
- b) A distinct pause or stop in the performance.





- c) Interference with the function of the judges (such as the judge having to move for safety reasons or making physical contact with a judge).
- d) Belt falling off during the performance.
- e) Failure to follow the instructions of the Chief Judge or any other misconduct

## 5.2. FOULS

The following fouls, if apparent, must be considered in the evaluation according to above criteria.

- a) Belt coming loose to the extent that it is coming off the hips during the performance.
- b) Time wasting, including prolonged marching, excessive bowing, or prolonged pause before starting the performance.

### EXPLANATION:

- I. *Kata is not a dance or theatrical performance. It must adhere to the traditional values and principles. It must be realistic in fighting terms and display concentration, power, and potential impact in its techniques. It must demonstrate strength, power, and speed — as well as grace, rhythm, and balance.*
- II. *It is the sole responsibility of the coach or the competitor to ensure that the Kata as notified to the score table is appropriate for that particular round.*

## 6. ACCREDITATION OF ATHLETES

- 1. Athletes have to be minimum 18 years old.
- 2. They have to be registered through their National Federation.
- 3. The registration has to be made on the WKF online registration system.
- 4. The registration, together with the medical attestation, the TUE approved by the National Anti-Doping organisation, and a coach must be uploaded on the WKF online registration system.
- 5. The registration will initially remain as “pending”, subject to a medical expert reviewing the entry (within max. two days)
- 6. One responsible person of the athletes’ NF has to collect the accreditation at the accreditation room within the established date and time
- 7. The athletes have to be available for extra testing at all times during the Championships

### EXPLANATION:

*Therapeutic Use Exemptions to be submitted and approved by the corresponding National Anti-Doping Organisation and then submitted to the WKF Anti-Doping Manager.*



**APPENDIX 1: MEDICAL ATTESTATION**

*Blind/visually impaired*

Name:			
First Name:			
Date of Birth:			
Sex:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; background-color: red; color: white;">Female</td> <td style="width: 50%; text-align: center; background-color: blue; color: white;">Male</td> </tr> </table>	Female	Male
Female	Male		
Country:			
Association/Club:			

Visual performance without correction:	Left: Right:
Visual performance with best correction possible:	Left: Right:
Eye refraction:	Left: Right:
Limitation of the field of vision:	Left: Right:

**Grading according to ICD-10:**

	H 53.-	H 54.-							
		H 54.0	H 54.1	H 54.2	H 54.3	H 54.4	H 54.5	H 54.6	
Grade 1 and 2									
Grade 3									
Grade 4									
Grade 5									

Mark the right with a cross, or record a new code

This is to certify that the information above is correct, and the Athlete may compete at a Championship

Place of examination:	Doctor (Stamp and signature)
Date:	



**Intellectually impaired**

Name:			
First Name:			
Date of Birth:			
Sex:	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="background-color: red; color: white;">Female</td> <td style="background-color: blue; color: white;">Male</td> </tr> </table>	Female	Male
Female	Male		
Country:			
Association/Club:			

**Medical classification:**

- **Grading according to ICD-10:**

F 70	F 71	F 81.9	F 82	F 90	Q 90	

Mark the correct classification with a cross, or record a new code

Assessment and Authentication:

Analysis: short assessment of the doctor	DYSKINETIC CELEBRAL PALSY + MENTAL MOTOR RETARDATION
place and date of expertise:	Doctor (Stamp and signature):

This is to certify that the information made above is correct, and the Athlete may compete at a Championships

**Functional classification:**

Consultant:	Name: Qualification: Institution:
Place of examination: Date:	Consultant (Stamp and signature)



This is to certify that the information made above is correct, and the Athlete may compete at a Championship

- **Grading according to ICF:**

		XXX.1	XXX.2	XXX.3	XXX.4
d 1	d 110				
	d 115				
	d 130				
	d 155				
	d 160				
d 2	d 220				
	d 240				
d 4	d 450				
	d 455				
d 5					
d 6					

Please fill in all appropriate sections. Please mark with a cross!



**Wheelchair user**

Name:		
First Name:		
Date of Birth:		
Sex:	Female	Male
Country:		
Association/Club:		

**Grading according to ICD-10 :**

	G 35.-	G 82.-					
		G 82.0-	G 82.1-	G 82.6-!			
				Neck Level	Thorax level	Lumbar level	Lumbar level
Exact level							

	Q 05.-				S 14.-	S 24.-	S 34.-	T 05.-
	Q 05.0 + Q 05.5	Q 05.1 + Q 05.6	Q 05.2 + Q 05.7	Q 05.3 + Q 05.8	S 14.7-! level	S 24.7-! level	S 34.7-! level	
Exact level								

Mark the correct classification with a cross, or record a new code

This is to certify that the information made above is correct, and the Athlete may compete at a Championship

Place of examination:	Doctor (Stamp and signature)
Date:	

**APPENDIX 2: LAYOUT OF THE KATA COMPETITION AREA**

