

Entry No. _____



2012 40th Annual U.S. OPEN Metropolitan TAE KWON DO CHAMPIONSHIPS

SATURDAY, April 28th, 2012
Bettendorf High School
Bettendorf, IA

FREE TOURNEY T-SHIRT

- YES! I'm Pre-registering by March 31st, and reserving a free official 2012 tournament T-shirt.
- CHILDREN: 2 Sizes...
 - Youth Small Youth Medium
- ADULTS: 5 Sizes... Small
 - Medium Large
 - X Large XX Large

STAMP

Name _____ Age _____ Sex _____ Wgt. _____ Rank _____

Home Address _____ Instructor's Name _____

School or Club Name _____ Address _____

In Case of Emergency: Name of Person to Contact _____ Tel. () _____

RELEASE OF CLAIMS RE PERSONAL INJURY AND ASSUMPTION OF RISK

I hereby voluntarily submit my application for attendance and participation in the aforementioned 40th ANNUAL U.S. OPEN METROPOLITAN TAE KWON DO CHAMPIONSHIPS. With full knowledge of the risk of injury, I do hereby assume full responsibility for any and all damages, injuries and/or losses that I may sustain or incur while attending or participating in the event and expressly waive and release all claims against the promoters, instructors and/or sponsors of said event, individually or otherwise, and release each of them in respect of any injury I may sustain.

I further understand that any medical treatment given to me at this event will be of emergency first aid treatment only, and I expressly request and consent to such emergency assistance. I consent that any pictures taken of/by me in connection with this event can be used for publicity, promotion or television showings, and waive any right to compensation thereof.

NOTE: THIS RELEASE CONSENT AND ASSUMPTION OF RISK HAS IMPORTANT LEGAL CONSEQUENCES. IF UNDER 18, THIS DOCUMENT MUST BE EXECUTED BY PARENT OR LEGAL GUARDIAN.

Signature of Contestant _____ Date _____ If under 18, Signature of Parent or Guardian _____

NOTE: Fill out the stubs on the right for each event you will be participating in. \$50.00 per contestant for one, \$55.00 for any two events \$60.00 for all three events (form, fighting, or breaking), payment to accompany entry form.

STAMP

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FORM SPARRING BREAKING

BREAKING

(Please Print)
 NAME _____
 SCHOOL OR CLUB _____
 RANK _____ WT _____ AGE _____
 DIVISION _____

SPARRING

(Please Print)
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