



# The 8th U.S. Yong In Open Taekwondo Championship

Pride of Tae Kwon Do

# COMPETITOR REGISTRATION FORM

March 15, 2015

## EVENT

\* Please check all appropriate space, and type or print clearly.

- WTF FORM    
  OPEN FORMS    
  SPARING (GYROOGI)    
  FREE-STYLE BREAKING    
  WEAPONS

Total No. of Events: \_\_\_\_\_ Total Amount Due: \_\_\_\_\_

Pre- Registration Fees: One event-\$80.00, two events- \$95.00, three events-\$110.00, four events-\$125.00 All five events-\$140.00.  
 PRE- REGISTRATION DEADLINE: Must be received by Friday, March 13, 2015.  
 LATE REGISTRATION FEE DEADLINE: \$95.00 per one event, \$15.00 per each additional event. Must be received by Sunday March 15, 2015.  
**NO REFUNDS, TRANSFERS AND/OR CREDITS WILL BE MADE UNDER ANY CIRCUMSTANCES.**

## PARTICIPANT INFORMATION \* All competitors must complete this section accurately and completely in order to participation.

YOUR MEDICAL INSURANCE NAME & NUMBER \_\_\_\_\_

Name \_\_\_\_\_ Gender:  MALE  FEMALE

DATE OF BIRTH \_\_\_/\_\_\_/\_\_\_ AGE \_\_\_ HEIGHT \_\_\_' \_\_\_" WEIGHT \_\_\_ LBS

BELT (SPECIFY COLOR ONLY): \_\_\_\_\_ DAN (BLACK BELTS ONLY) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ E-mail \_\_\_\_\_

## SCHOOL & INSTRUCTION INFORMATION

SCHOOL NAME: \_\_\_\_\_ TEL: (\_\_\_\_\_) \_\_\_\_\_

INSTRUCTOR'S NAME: \_\_\_\_\_ RANK: \_\_\_\_\_ DAN

SCHOOL ADDRESS (in full): \_\_\_\_\_ E-mail \_\_\_\_\_

## Payment Information

(PLEASE CHECK ONE)

- CASH   
  MONEY ORDER/ CASHIER'S CHECK  
 SCHOOL CHECK   
  CREDIT CARD   
  SCHOOL CREDIT CARD

NO PERSONAL CHECKS ACCEPTED  
 MAKE ALL CASHIERS CHECK/ SCHOOL CHECK OR  
 MONEY ORDER TO: **YITKD**

3 - 5 Village Square East, Suite 3  
 Clifton, NJ 07011

## Credit Card Information (VISA, MASTER, DISCOVER, AMEX)



NO REFUNDS, TRANSFERS, AND OR/ CREDITS WILL BE MADE  
 UNDER ANY CIRCUMSTANCES.

Credit Card # \_\_\_\_\_ Expires \_\_\_/\_\_\_/\_\_\_ 3 Digit Security Code \_\_\_\_\_

Name on the Card \_\_\_\_\_ Amount (\$) \_\_\_\_\_

Credit Card Billing address \_\_\_\_\_ Zip Code \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

**Register On Line !**  
[www.matkdc.com](http://www.matkdc.com)  
[www.katkda.com](http://www.katkda.com)

## Liability Waiver

I UNDERSTAND THAT TAEKWONDO IS A PHYSICAL CONTACT SPORT WHICH INVOLVES THE RISK OF INJURY. I AGREE THAT I WILL BE RESPONSIBLE FOR ALL CASE OF ACCIDENTS SUCH AS ANY DAMAGE, LOSS AND ANY INJURY ETC. WHICH OCCURRED DURING PHYSICAL EXERCISE AND COMPETITION OF DEMONSTRATION TILL THE FINISH OF THE TOURNAMENT. I AGREE THAT THE ORGANIZING COMMITTEE FOR THE 8TH U.S. YONG IN OPEN TAEKWONDO CHAMPIONSHIP INCLUDING ORGANIZERS, OFFICIALS, STAFF AND VOLUNTEERS AS WELL AS REFEREES, MASTERS, INSTRUCTORS, COACHES, FELLOW COMPETITORS, STAFF EXCEPT COMPETITOR HERSELF/HIMSELF WILL BE INDEMNIFIED FROM ALL ACCIDENTS AS ABOVE AND RELEASE AND FOREVER DISCHARGE FROM ANY CLAIMS FOR DAMAGES. I, ALSO AGREE THAT THE MEDICAL TREATMENT PROVIDED BY THE ORGANIZING COMMITTEE, IF NECESSARY WILL BE A FIRST AID TYPE ONLY. IN CONSIDERATION OF THE PRIVILEGE OF PARTICIPATING IN THE COMPETITION IN THE 8TH U.S. YONG IN OPEN TAEKWONDO CHAMPIONSHIP, FOR MYSELF AND MY HEIRS, CHILDREN, PARENTS, GUARDIANS, EXECUTORS, PERSONAL REPRESENTATIVES, ASSIGNS AND ADMINISTRATORS, I FOREVER RELEASE, ACQUIT, WAIVE DISCHARGE, AND COVENANT NOT TO SUE COLONIA HIGH SCHOOL, THE BOARD OF EDUCATION OF WOODBRIDGE TOWNSHIP SCHOOL DISTRICT NEW JERSEY, THE YONG IN TKD, THE UNITED STATES OLYMPIC COMMITTEE, IMA, OR ANY OF THE ORGANIZERS, VOLUNTEERS, SPONSORS, AFFILIATED ORGANIZATIONS, COACHES, INSTRUCTORS, MANAGERS, TRAINERS, OR DOCTORS, OR ANY OTHER PERSONS, OR ORGANIZATION INVOLVED IN THE 8TH U.S. YONG IN OPEN TAEKWONDO CHAMPIONSHIP, OR ANY OF THEIR REGENTS, DIRECTORS, OFFICERS, MANAGERS, EMPLOYEES, AGENTS, AFFILIATES, ATTORNEYS, SPOUSES, HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS, OR ASSIGNS. IF YOU ARE UNDER 18 YEARS OLD, YOU MUST HAVE A PARENT OR GUARDIAN'S ACKNOWLEDGMENT AND AGREEMENT HEREWITHIN.

Contestant's Signature \_\_\_\_\_

### Emergency Contact Person

Legal Guardian's Signature (If under 18 year old) \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_

Name \_\_\_\_\_ Tel \_\_\_\_\_