

2009

Region Twenty Championship Official Entry Registration Form



Name _____ Assoc. # _____ Rank _____

Male __ Female __ Age __ Birthdate __/__/__ Weight _____

Address _____ City _____ State _____ Zip _____

e-mail _____ Tel _____ Tel _____

Studio name _____ Instructor's name _____

Please see the category list and enter the appropriate number

Weapons
Division #

Forms
Division #

Sparring
Division #

Creativity
Division #

Team Sparring
Division #

WAIVER OF CLAIMS

I, the undersigned, do hereby agree to abide by the rules which may be explained verbally or in writing at the 2009 Region Twenty Championship. I recognize that Tang Soo Do and other forms of the Martial Arts are activities in which substantial physical contact may regularly occur and that such contact may result in physical injury. In consideration of my participation in any activities held by or on behalf of the 2009 Region Twenty Championship. I, for myself and my successors, heirs and assigns, do hereby release and discharge the World Tang Soo Do Association, Grandmaster Jae Chul Shin, the representatives/agents of the World Tang Soo Do Association, United States Karate Academy, Sal Convento, the representatives/agents of United States Karate Academy, the City of San Diego, Point Loma High School, the representatives from my own studio, and my own instructor from any and all claims, demands, and causes of action of whatsoever nature which I or my successors, heirs and assigns ever may have against them for, on account of, by reason or arising in connection with any Martial Arts instruction, participation or any other activity held by or on behalf of the 2009 Region Twenty Championship and hereby waive any claims demands and causes of action. I agree that my performance or attendance at the 2009 Region Twenty Championship may be filmed or otherwise recorded or telecasted live and I consent to the use of my likeness to be used by any appointed agent of the World Tang Soo Do Association, including any public news media. I waive any right to compensation for the use of my likeness recorded at any WTSDA event forever.

Participant

Signature X _____

Parent /Guardian: Print Name X _____
(if under 18)

\$40 for all events postmarked by September 1, 2009
\$50 for all events postmarked by October 1, 2009
\$60 for all events postmarked by October 16, 2009,

Registration Closes October 16, 2009.

Pre-Order Championship T-Shirts \$20.00
Add 2.00 for 2 XL size
Order Deadline October 16, 2009

Item	Cost
R20 Championship Registration (Includes (2) Spectator Passes)	_____
Additional Spectator Passes @ \$5.00ea ()	_____
R20 Championship Commemorative T-Shirts	
<i>Sizes ChS ChM ChL S M L XL XXL(add 2.00 for 2XL)</i>	
Qty _____ Size _____	\$20 ea _____
Qty _____ Size _____	\$20 ea _____
Qty _____ Size _____	\$20 ea _____

Total Amount Due \$ _____

Checks payable to: United States Karate Academy
Send to: United States Karate Academy.
2590 Truxtun Rd. San Diego, CA. 92106

Official use Only: Date Received: Amt. Received \$ Check # Cash __ Participant # Returned