

# 2015 Park's Martial Arts Tae Kwon Do Championship

Saturday, March 28th, 2015

<b>Competitor Registration Form</b> All competitors must complete and mail to our school by <b>March 20<sup>th</sup>, 2015</b> <b>Please follow these steps:</b>							
<b>Complete this form</b>	Please print or type the required information on this form. Read and sign the Liability Waiver below. If the competitor is under 18 years old, a signature of the parent or legal guardian is required. Any missing item on this form may result in delay of your registration on the day of the championship.						
<b>Enclose Registration Fee</b>	Please enclose your registration fee along with your completed Registration Form payable to <b>Park's Martial Arts</b> .						
	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center; border: none;">Pre-register</td> <td style="width: 50%; text-align: center; border: none;">Register on or after March 20<sup>th</sup>, 2015</td> </tr> <tr> <td style="border: none;">\$65 for one or two events, \$75 for three events</td> <td style="border: none;">\$75 for one or two events, \$85 for three events</td> </tr> <tr> <td style="border: none;">\$85 for four events</td> <td style="border: none;">\$95 for four events</td> </tr> </table>	Pre-register	Register on or after March 20 <sup>th</sup> , 2015	\$65 for one or two events, \$75 for three events	\$75 for one or two events, \$85 for three events	\$85 for four events	\$95 for four events
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<b>Mail this completed form with your check</b>	Mail to <b>Park's Martial Arts</b> <b>1334 Clarkson Clayton Center</b> <b>Ellisville, MO 63011</b>						

Competitor's Name			School/Club's Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone Number			Phone Number		
Parent's Name			Master or Instructor's Name		

Belt Color	Rank	Sex: <b>M</b> <input type="checkbox"/> <b>F</b> <input type="checkbox"/>	Age	Weight	Height
<b>Please check the events you will be entering</b>					
Official Forms <input type="checkbox"/>	Family Form <input type="checkbox"/>	Board Break <input type="checkbox"/>	Sparring <input type="checkbox"/>		

**Liability Waiver:** In consideration of your acceptance of my registration, I do hereby, for myself, my heirs, executors, and administrators wave, release and forever discharge any and all rights and claims for any damages which I may or may accrue to me against the Park's Tae Kwon Do Championship and its organizing committees, Park's Martial Arts Academy, Parkway School District, and all members in connection with this event. I understand that Tae Kwon Do is a body-contact sport which involves a risk of injury including permanent disability, paralysis and death; therefore, I fully accept and assume all such risks and all responsibility for losses, costs, and damages incurred as a result of the participation in the said event. I further agree that the event director for publicity or promotion at any time may use any pictures and/or videos taken of or by me in connection with the said event, either now or in the future.

In signing below, I certified that I am at least 18 years old. I have read and fully understand the above Liability Waiver for myself and/or my child.

**Competitor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
 (Signature of parent or guardian if under 18 years old)

Presented by Park's Martial Arts Academy. 1334 Clarkson Clayton Center, Ellisville, MO 63011. Email: usayoungpark@Yahoo.com