

# COMPETITOR REGISTRATION FORM

**Registration must be delivered no later than Monday, NOV 2nd 2015**

Payment must be in the form of **certified check** or **money order** payable to **"United Martial Arts"** (no personal checks)

**Mail to :**  
Majest Martial Arts  
2015' KukKiWon Cup  
20964 Southbank St,  
Sterling, VA 20165 USA

**Did you include :**  
\_\_\_\_ Registration Form  
\_\_\_\_ Payment  
Turn in form and payment to school instructor.

First Name:                      MI:

Last Name:

Email:

TaeKwonDo School: Name:  Phone: (  )  -   
City:  State:  Zip:

Age on 01 Oct 2015:   Gender (Circle)  M  F Height (in inches)   Weight (lbs)

Belt: Belt Color:  Black Belt Dan Level:

Event: Applications with missing information will not be processed. Please fill in all information completely!

Spirit (Cubs & white)       Tag Team Sparring  
 Poom Sae       Team Poom Sae  
 Breaking       Individual Creative Breaking  
 Sparring       Team Demo  
 World Class Sparring (12 and Up Black Belt HEAD CONTACT)

One Event \$80    Two Events \$100    Three Events \$120    Four Events \$130

Total Amount Enclosed: \$ \_\_\_\_\_ (no refunds on entry fees)

## LIABILITY WAIVER

In consideration of your acceptance of my registration, I do hereby, for myself, heirs, executors, and administrators waive, release, and forever discharge any and all rights claims for damages which I may have, or which may accrue to me, against Majest Martial arts and United Martial Arts and for its state and district associations, or their respective officers, agents, representatives, successors, and/or connection with my association with, or entry in the above athletic meet and competition, and in connection with my medical service I may be provided in connection with any such injury or illness. I understand TaeKwonDo is a body contact sports and I further understand all contents of the rules and regulations and general information which was published by the World Tae Kwon Do Federation (WTF) and I agree with them in their entirety. I further understand that I may be dismissed from the premises without compensation or refund if my conduct is not courteous and cooperative for the successful operation of the KUKKIWON international Cup & Washington D.C. Open.

**I hereby certify that I have read and understand the above information and my responses are true and accurate to the best of my Knowledge.**

Contestant's signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Parent/Legal Guardian Signature (if contestant's age under 18)