2010 - Northwest Black Belt Association
TaeKwonDo Tournament

320.763-6552

OFFICIAL REGISTRATION FORM

Tournament Date - Saturday April 17th, 2010

All competitors should pre-register for this tournament.
Registrations should be post marked by April 10th.

IMPORTANT INSTRUCTIONS: Please read the following instructions and the entire form carefully before you start writing.
* Please print legibly using all capital letters.
* Write the expected rank on the day of the tournament.
* For Athlete's Safety ALL Information MUST be Accurate and Complete !
* All Payments are absolutely non-refundable - $30 charge on all returned checks.
* Read about the entry fees and the late charges. (No Exceptions)
* Should you have any questions, please call 320.587-6500.

* Make Checks / payable to Northwest Black Belt Association and Mail to:

Northwest Martial Arts
1030 Highway 7 West
Hutchinson, MN 55350

Participants Name:_____ Date of Birth: ____/____/____
(Last Name) (First Name) (Initial) (Month) (Day) (Year)

Home Address: _____
(Street) (City) (State) (Zip)

Home Phone: (_____) _____ Name of TKD School _____

Name of Instructor:_____ TKD School Phone: ( ) _____

In case of an emergency call: (Name)_____ (Phone)_____

Age:_____ Sex: Male / Female Northwest Membership Number:_____ (Must show card)

TKD Rank (circle one) Little-NINJA, W, O, Y, G, B, P, PT, B, BT, R, RT

Black Belt Rank (circle one) 1st Poom, 2nd Poom, 3rd Poom, 1st Dan, 2nd Dan, 3rd Dan, 4TH Dan+

Please check divisions in which you wish to compete:

Pattern (____) Breaking (____) Team Pattern (____)
Sparring (_____) enter weight so we can create proper divisions prior to event (_____)

FEES: $65.00 for One or ALL Events (Breaking Add $5.00)

With Early Registration (postmarked before 4/10/10); you will save $10.00 off registration !

I have enclosed check or money order for $_____ payable to Northwest Martial Arts*Please do not send cash through the mail.

LIABILITY WAIVER (ADULT SIGNATURE REQUIRED)

I hereby submit this registration and liability waiver form to participate in the 31st Annual Northwest Association Tournament. I certify that the above information is true and correct and hereby release, discharge, and waive any and all responsibilities of the Northwest Black Belt Association, Northwest Martial Arts, Tournament Organizing Committee, referees, instructors, and other competitors from liability for any injury, including death, and for damage to, or loss of property which may be suffered by myself arising out of, or in any way resulting from, or attributable in whole or part, to my traveling to, training for, being coached in, using any sports equipment in, or participating in a Northwest Black Belt Association Event. I understand that TaeKwonDo is a contact sport and I am responsible for my own medical insurance for any and all injuries that I may sustain from competition.

Participants Signature (if 18 years of age or older)_____ Date: ____/____/____

Parent/Guardian Signature_____ Date: ____/____/____

Office use only. Do not write below this line. Review your form thoroughly before sending.

Application Received	Post Marked	Fee Paid
____/____/2010	____/____/10	$_____(Check, Money order, Cash)