

**COMPETITOR REGISTRATION FORM**  
**33<sup>rd</sup> ANNUAL OKLAHOMA INVITATIONAL**  
**TAEKWONDO CHAMPIONSHIP**

**February 25, 2018**

Del City High School • 1900 S Sunnyslane Rd, Del City, OK 73115

Name \_\_\_\_\_ Age \_\_\_\_\_ Wt \_\_\_\_\_ Ht \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ Tel \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Belt Color \_\_\_\_\_

Club \_\_\_\_\_ Instructor's Name \_\_\_\_\_

Street Address \_\_\_\_\_ Tel (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, the undersigned, hereby waive all claims against In Hui Won, all persons connected with the 33<sup>rd</sup> Annual Oklahoma Invitational Taekwondo Championship, Mid-Del schools, Del City High School, Tournament officials, Grand Master Won's Taekwondo, and/or the U.S. Central Taekwondo Association for any injuries that I may sustain during my participation in the competition. I also assume full responsibility for any of my actions during and in connection with said tournament.

I further agree that any pictures taken of or by me in connection with the said Championship can be used by the tournament director for publicity or promotion without compensation at this or any other time.

Competitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

If competitor is under 18 years, Signature of Parent/Guardian \_\_\_\_\_

**PLEASE CIRCLE YOUR COMPETITION EVENTS:**                      **POOMSAE (FORMS)**                      **KYORUGI (FIGHTING)**

**PLEASE CIRCLE YOUR SPECIAL EVENTS:**                      **BREAKING**                      **ONE, TWO, OR THREE-STEP SPARRING**

**COUPLE POOMSAE                      CREATIVE POOMSAE                      TEAM POOMSAE                      WEAPONS**

**HAPKIDO:**    **LONG FALLING                      HIGH FALLING                      SELF DEFENSE**

**PRE-REGISTRATION & ENTRY FEE**

Pre-registration received by: February 22, 2018

\$70.00 for any one events

\$10.00 for any second event

\$25.00 for each additional event

Late Fee: add \$20.00 at the door

**SEND REGISTRATION & MONEY TO:**

U.S. Central Taekwondo Association

10801 S. Sunnyslane Road

Oklahoma City, OK 73160

Tel. (405) 793-0752    Fax (405) 794-0768

[gmwons@gmail.com](mailto:gmwons@gmail.com)

**REFUND PROCESSING FEE IS \$25 or FULL APPLICATION FEE MAY BE APPLIED TO NEXT TOURNAMENT**

**\* IF PAYING BY CREDIT CARD ONLY VISA AND MASTERCARD ACCEPTED\***

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Billing Zip \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Card Type: \_\_\_\_\_ Amt: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_ Phone: \_\_\_\_\_