

Ohio Taekwondo Academy Invitational
November 3, 2018

(Please print clearly or type)

Competitor Name: _____ Male/Female (circle one) Contact Number: _____

Address: _____ City _____ State _____ Zip _____

Rank (Kup/Dan) _____ Weight _____ Height _____ Date of Birth ___/___/___ Age _____

School/Club Name: _____ City: _____ State: _____

Instructor: _____ School Phone: _____

Notify in case of an Emergency: _____ Phone: _____

Check all events you will be participating in:

Forms _____ Olympic Sparring _____

Cost: One Event \$40.00 Two Events \$55.00

Special Notes – Please Read:

- **All Forms** must be post marked by **Saturday, October 27th**; no registration forms will be accepted the day of the event.
- **Cash, Certified Checks or Money Orders made payable to Ohio Taekwondo Academy, LLC**
- **No Personal Checks**

***** **LIABILITY WAIVER** *****

In consideration of your acceptance of my entry in this competition, I do hereby, for myself, my heirs, executors and administrators waive, release and forever discharge any and all rights and claims for damages which I may have against the Ohio Taekwondo Academy, LLC, The Blue Ash Recreation Center, The City of Blue Ash and all members of the tournament and their respective officers, agents, representatives, successors, and/or assigns and against any competitor for any and all damages which may be sustained by me in connection with my association with or entry in the above athletic meet, and which may arise out of traveling to, participating in, and/or returning from the athletic meet. I fully understand that Taekwondo is a body contact sport and that injuries can occur during competition. I further acknowledge having received and reviewed a copy of the rules of this competition. I fully understand the competition rules and agree to fully abide by them. In the event this application is for a minor, I warrant and represent that I am the parent or legal guardian of such applicant and that I waive any and all rights and claims for damages claimed for competitors contained herein.

I, the undersigned, do hereby consent that any pictures produced or taken of me in connection with this tournament can be used for publicity, promotion, or television showing, and I waive any compensation in regard thereto.

Note: This release, consent and assumption of risk, has important legal consequences. If the competitor, whose name appears above, is under the age of 18, his/her parent or legal guardian must execute this document.

Competitor/Parent or Legal Guardian _____ **Date** _____

Mail to: Ohio Taekwondo Academy 7504 Hamilton Ave Cincinnati, Ohio 45231