

FLEX Intra School Tournament - June 13th 2015

Entry Application

All information below **MUST** be completed. *Failure to complete ALL information may result in delayed processing and possible denial of application. (PLEASE PRINT/TYPE LEGIBLY.)*

Athlete's Name PLEASE PRINT		
2015 AAU Membership #		
Email		
Phone		
Date of Birth		
	Age	Weight
Gender (circle one)	M	F
Group Creative Forms Event Info.	2 or more people. Any belt level. Any official or made-up form may be used. Music may be used but not required. 2 minute time limit!!	
Board Breaking Event Info.	Due to the fun nature of this event, demo boards (easily breakable) will be used and MUST be purchased at Flex when registering. Minimum of 2 stations. Max. of 4	

Current Rank (Please Check One)
9 th Kub (White Belt)
8 th Kub (Yellow Belt)
7 th Kub (High Yellow Belt)
6 th Kub (Green Belt)
5 th Kub (High Green Belt)
4 th Kub (Blue Belt)
3 rd Kub (High Blue Belt)
2 nd Kub (Red Belt)
1 st Kub (High Red Belt)
Bo Dan Black Belt
1 st Dan Black Belt
2 nd Dan Black Belt
3 rd Dan Black Belt
4 th Dan Black Belt and Up
Special Needs/ Specially Challenged. <i>Please make sure to also indicate your rank above.</i>

I will compete in the following categories:

Check all that apply.

Forms (Poomse) Olympic-Style Sparring
 Group Creative Forms Board Breaking

Entry Fees and Deadlines:

All fees need to be paid no later than June 6th 2015.

One Event		\$35
Each Additional Event	\$5X _____ =	\$ _____
Boards	\$2each X _____ =	\$ _____
TOTAL:		\$ _____

IntraTournament Date: Saturday, June 13th, 2015 Opening Ceremony 11am

NO COMPETITOR REGISTRATION AT THE DOOR!

All tournament and board fees are non-transferable and non-refundable.

Please support Flex Tae Kwon Do by participating in this Fun Event and purchasing lunch items from concessions in the Activity Room. THANK YOU!

I the undersigned, do hereby voluntarily submit my application for attendance and participation in the Flex Intra School tournament, and do hereby assume full responsibility for any and all damages, injuries, or losses that I may sustain or incur, if any, while attending or participating, and I hereby waive all claims against the promoters, venue, officials, or sponsors of said Flex Intra School tournament. I fully understand that any medical treatment given me will be of a first aid treatment only. I understand that the fee paid is non-refundable.

DATE: _____ SIGNATURE: _____

PARENT OR GUARDIAN: _____