



9TH EVOLUTION KP&P ELECTRONIC GEAR TOURNAMENT

SATURDAY AUG 19TH, 2017 @ WEBER STATE UNIVERSITY

Shepherd Union Building Ballroom B 3848 Harrison Blvd. Ogden, Utah 84408 (801) 626-6000

TOURNAMENT DIRECTOR: MASTER SHAWN HUGH

Cell: (916) 208-6098 or email Mr.Hugh@HughTKD.com

OFFICIAL COMPETITOR ENTRY FORM

Player's Name: LAST / FIRST		Weight: (Lbs)	Age:	(Circle one) MALE / FEMALE
Belt Rank: (Circle one): (<input type="checkbox"/> if Little Tiger or Dragon Checkmark) White / Yellow / Green / Blue / Red / Deputy / Black		Phone #: () -		Height: (Please fill out) _____ Feet _____ inches
Martial Arts Studio Name:	Master Instructor:	Your E-Mail (For confirmation):		

CHECKS PAYABLE TO: Kim's Academy of Roy (one check for multiple students is okay) **5585 s 3500 w ste C, Roy, UT 84067**
 Scan & E-Mail Entry Forms to: Mr.Hugh@HughTKD.com (Scan & Email Preferred) -or- send by cell with TEXT

Credit Card: _____ (Exp ____/20____) Visa /MC /Amex /Discover (circle one)

Name as appears on Card: _____ (\$3.00 transaction fee will be waived if by Aug 5th)

* Early Registration Sunday AUG 13th: \$55 for 2 events \$10 per additional event

* Late Registration AUG 14th until AUG 18th \$10 late fee

* Day of Registration (\$20 late fee)

2 EVENTS:	\$ 55 +
Add'l Events:	\$ _____ +
Sock Rental(\$10)	\$ _____ +
LATE FEE:	\$ _____ +
TOTAL:	\$ _____

(Circle or check all you will compete in)

OLYMPIC SPARRING ITF POINT SPARRING 2V2 OLYMPIC SPARRING
 Partners Name _____ I want assigned partner

SWORD FIGHTING KNIFE FIGHTING (NO UNIFORM white shirt required/ may be purchased)

TRADITIONAL POOMSAE TEAM FORMS TRADITIONAL (\$15/MEMBER)

TIGER TAILS/FLAG SPARRING SOLO MELEE 2V2 PARTNER NAME _____

WEAPONS FORMS (TRICKING NON-TRICKING) POWER BREAKING (HAMMER FIST ONLY)

CREATIVE FORMS (TRICKING NON-TRICKING) TEAM FORMS CREATIVE (\$15/MEMBER)

\$10 "ELECTRONIC SOCK" RENTAL FEE IS for EVERYONE over 12 yrs old WTF SPARRING PLAYERS

LIABILITY WAIVER, RELEASE, AND INDEMNIFICATION AGREEMENT: In consideration for the privilege of participating in the 9th Evolution tournament and in further consideration of being accepted to compete, I do hereby acknowledge that my participating in this tournament, I may suffer bodily injury or death, and loss of property, and I do hereby for myself, for my heir, parents, guardians, executors, personal representatives and assigns, release, acquit, waive, forever discharge, hold harmless, and agree to indemnify Kim's Academy of Roy, and Weber State University, and from any and all liability, claims, demands, costs, damages, actions, causes of actions, or suits of any nature or kind whatsoever that I, my heirs, parents, guardians, executors, personal representative, assigns or administrators may now or hereafter have or claim to have, on account of or arising out of personal injuries, death, or damage to my person or property or loss of time, loss or service, or for expense incurred, occurring to me because of or in any way related to my training for, my traveling to, my participating at, and my returning from said competition or through the use of any and all facilities connected therewith: Further, I hereby grant permission in case of injury to have an athletic trainer and/or doctor residing in the United States to provide me with medical assistance and /or treatment. I certify that I am in good physical condition and have no disease or injury that would impair my performance or physical condition in training for and participating in the competition. I agree to accept all financial obligations incurred as a result of any medical assistance, treatment and related expenses, provided in connection with any injuries which I may receive in the competition. **It is agreed that it is compulsory and mandatory that this liability waiver, release, and indemnification agreement be fully completed as a precedent to this official entry form being accepted,** and that the completed liability waiver, release, and indemnification agreement is incorporated by reference as a part of the official entry form. **! UNDERSTAND ALL ENTRY FEES ARE NON REFUNDABLE FOR ANY REASON.**

Weight & Belt Certification: I certify the "weight" listed above is accurate to a variance of no more than (+ / -) 5 Lbs. I further agree to be weighed without question or reserve by a member of the tournament staff. Just be honest!

Competitor's Signature:	Date:	OFFICIAL USE ONLY: Checked: <input type="checkbox"/> Bracketed: <input type="checkbox"/> Competitor # _____ Emailed: <input type="checkbox"/> Paid: _____ Total: \$ _____
Parent/Guardian's Signature:	Date:	