

1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>		Rank
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**Do Not Write Above This Line**

## 2017 Tae Kwon Do-Chung Do St. Louis Gateway Championships

Where: Blue Wave Martial Arts, 100 Mall Parkway, Wentzville, MO 63385, (636) 856-8560  
When: Saturday, November 4th, 2017 Start Time: 8:00 a.m.

Spectator Admission is FREE  
 Tournament Registration: \$75

Name (Print) \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Wt. \_\_\_\_\_ Ht. \_\_\_\_\_  
Home Address \_\_\_\_\_ Phone \_\_\_\_\_  
School or Club Name \_\_\_\_\_ Phone \_\_\_\_\_  
School or Club Address \_\_\_\_\_  
Instructor's Name \_\_\_\_\_ Instructor Rank \_\_\_\_\_  
Date \_\_\_\_\_ Signature \_\_\_\_\_

Fill in Box Below Example:

██████████

**IF UNDER LEGAL AGE, PARENT OR GUARDIAN MUST CO-SIGN**  
I agree to the terms on the reverse side of this card

DIVISION	Age Group	Black (2)	Black (1)	Brown (1,2)	Purple (3,4)	Green (5,6)	Yellow (7,8)	White (9,10)
Mini Pee Wee	5 — 8							
Pee Wee	9 — 11							
Junior	12 — 15							
Senior	40+							
Women	All Ages							
Men	All Ages							

1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>		Rank
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Mini Pee Wee	5 — 8							
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Senior	40+							
Women	All Ages							
Men	All Ages							

I hereby voluntarily submit my application for attendance and participation in the Tae Kwon Do Tournament and/or Championship, sponsored by Blue Wave Martial Arts & Fitness LLC, the Chung Do Tae Kwon Do Association and directed by its affiliated member schools and/or Clubs, 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, operators, or sponsors of said Tae Kwon Do tournament and/or Championship individually or otherwise, for any claim for injuries that I may sustain.

I fully understand that any medical treatment given me will be first aid treatment type only.

I agree that my performance or attendance at the competition or both may be filmed or otherwise recorded or telecast live, and I consent to the use by Blue Wave Martial Arts & Fitness LLC, the Chung Do Tae Kwon Do Association member schools and/or clubs of my name, likeness, voice, poses, pictures and biographical data, concerning me, fully or in part and in any form or language with or without other material, throughout the world without limitation, for television, radio and/or theatrical motion pictures by any device now known or thereafter devised, and I waive any compensation therefore.

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