



TEXAS CUP



TAEKWONDO CHAMPIONSHIPS

competitor registration form

EVENT Address; 2400 Chisholm Trail, Round Rock, TX 78681

9:00AM ALL black belts, 11 and above for SPARRING.
Color belts ages 5 and under (6-7) Year Olds will be called next

SEPTEMBER 7 2024

MAIL check or money order payable,

TO: **ARMANDO GARCIA** SAVE \$\$\$\$ REGISTER EARLY -----ENTRY FEES
129 Wayside Dr Pre-registration STRONGLY RECOMENDED

Elgin TX 78621 **EARLY BIRD** if registering Postmarked before, **AUGUST 3RD 2024** one or two events **\$90.00 Early Bird**

Grandmaster A. Garcia I **REGULAR** Registration before, **AUGUST 17TH** one or two events **\$100.00**

LATE Registration before, **AUGUST 24TH** one or two events **\$120.00**

(512) 470 1915, agarcia8dan@gmail.com IF POST MARKED AFTER **AUGUST 24TH** ADD ADDITIONAL **\$20.00**

Spectators at the door **\$15.00** (children under 4 free) buy them now **\$12.00** Quantity _____ Amount; _____

<https://www.ustdtkx.com/home.html>

TOTALS; \$ _____

COMPETITORS NAME: (please print) _____

AGE: ___ DATE OF BIRTH: ___/___/___ First name Last name
HEIGHT: ___ WEIGHT: ___ SEX: ___ BELT/___

"age" put down the age STUDENT will be on **MARCH 7 2025.**, have "birth certificate" on hand in case of age dispute.

PHONE: ,_() - _____

E-MAIL; [grid]

ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

INSTRUCTOR NAME: _____ **INSTRUCTOR'S RANK;** _____

INSTRUCTOR'S PHONE NUMBER; _() - _____

E-MAIL; [grid]

TAEKWONDO SCHOOL NAME _____

TAEKWONDO SCHOOL ADDRESS _____

CITY: _____ STATE: _____ ZIP: _____

I HEREBY SUBMIT MY APPLICATION FOR REGISTRATION TO THE 2023 TEXAS CUP TAEKWONDO CHAMPIONSHIPS INTERNATIONAL TO BE HELD AT **THE ROUND ROCK SPORTS CENTER COMPLEX** 2400 Chisholm Trail, Round Rock, TX 78681 TEXAS USA.

I, THE UNDER SIGNED HEREBY WAIVE ANY AND ALL CLAIMS AGAINST ALL PERSONS CONNECTED WITH THE 2024 TEXAS CUP TAEKWONDO CHAMPIONSHIPS INTERNATIONAL, ITS SPONSOR ORGANIZATIONS, VOLUNTEERS, STAFF AND OFFICIALS, I, WE ASSUME ANY AND ALL LOSS TO MY SELF, MY CHILD OR OTHERS, I, WE CLEARLY UNDERSTAND THE FIGHTING ASPECTS OF THIS SPORT "TAE KWON DO", AND THAT COMPETITION INVOLVES BODILY CONTACT. I, WE WAIVE ANY AND ALL CLAIMS OF DAMAGE AGAINST USA MARTIAL ARTS, USA TAEKWONDO, ITS PRINCIPALS, AGENTS REPRESENTATIVES, EMPLOYEES, VOLUNTEERS, AND OR **FACILITIES OWNERS AND ADMINISTRATORS INCLUDING THE ROUND ROCK SPORTS CENTER COMPLEX ITS MANAGERS STAFF COORDINATORS, ETCETERA**, OF AND FROM ANY AND ALL CLAIMS RESULTING FROM THIS EVENT, INCLUDING BUT NOT EXCLUDING TRAVELING TO AND FROM, I UNDERSTAND THAT THIS AGREEMENT IS NON REVOCABLE. I, WE ALSO UNDERSTAND THAT ANY PICTURES OR FILM TAKEN OF ME OR BY ME MAY BE USED FOR PUBLICITY WITH OUT COMPENSATION TO ME MY HEREINS, OR REPRESENTATIVES AT THIS OR ANY OTHER TIME TO TAKE PICTURES FROM THE FLOOR YOU MUST HAVE PAID A **50 DOLLAR** FLOOR PASS YOU CAN PAY FOR IT THE DAY OF THE EVENT, "**LOOK**", FURTHER MORE NO PICTURES OR FILM WILL BE ACCEPTED AT PROVE OR EVIDENCE OF ANY SCORE DON'T ASK TO BE CONSIDERATE IT. I UNDERSTAND THAT BECAUSE OF THE NO REFUND POLICY ANY AND ALL MONEYS PAID ARE NOT REFUNDABLE UNDER ANY CIRCUMSTANCES. "DON'T ASK".

MOREOVER, WITH THIS I AM ASSERTING THAT, I, ME, WE, MY CHILD, AM, IS, **FULLY INSURED** AND HAVE TRAINED SUFFICIENTLY AND IS READY TO ENTER AND PARTICIPATE IN THIS PRESTIGIOUS HIGH LEVEL COMPETITION EVENT. I, WE ALSO KNOW THAT FOR THIS REGISTRATION TO BE "ACCEPTED" IT MUST BE THOROUGHLY FILLED OUT INCLUDING SIGNATURES.

SIGNATURE; X _____ DATE _____

GUARDIAN (IF UNDER 18)