



# ATA Regional Tournament

Division  ATA Tiger  Novice  Competitive

3<sup>rd</sup> Family Member

Special Abilities (please check appropriate box below):

No  Yes:  Cognitive  Physical  Autism Spectrum

ATA # \_\_\_\_\_

Name: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

DOB: \_\_\_\_\_

Competition Rank: \_\_\_\_\_

Gender:  Female  Male

Competition Age  
(as of 12/31/18): \_\_\_\_\_

School # \_\_\_\_\_ Region # \_\_\_\_\_ City/State: \_\_\_\_\_

Instructor: \_\_\_\_\_ School Phone: \_\_\_\_\_

## PRICING GUIDE

Mark all events competing in:

Forms/Sparring (or One-Steps)  
(Additional \$20 if doing both Sparring & One-Steps)

Traditional Weapons

Combat Weapons Sparring

Creative Forms  XMA Forms

Creative Weapons  XMA Weapons

**\*Creative/Xtreme requires competing in corresponding Traditional Division(s)**

~Forms/Sparring - \$45; each additional event \$20

~If not doing F/S: first event \$35 & each additional event \$20

~3<sup>rd</sup> family member: each event \$10

**TOTAL:** \_\_\_\_\_  Paid: \_\_\_\_\_ (initial)

Pre-register with you instructor! School owners: Mark individual slips as paid, turn top portion with school owner form at school owner registration. Top portion with waiver remains with host. SEPARATE INDIVIDUAL SLIPS FOREACH DIVISION!

Special Abilities (please check appropriate box below):

No  Yes:  Cognitive  Physical  Autism Spectrum

Novice  Competitive

## Traditional Division

ATA # \_\_\_\_\_ Name: \_\_\_\_\_

Gender:  Female  Male Competition Age: \_\_\_\_\_ Competition Rank: \_\_\_\_\_

School # \_\_\_\_\_ Region # \_\_\_\_\_ Instructor: \_\_\_\_\_

Forms  Weapons  One-Steps  Sparring  Combat



Paid: \_\_\_\_\_ (initial)

Special Abilities (please check appropriate box below):

No  Yes:  Cognitive  Physical  Autism Spectrum

Novice  Competitive

## Creative/Xtreme Division

ATA # \_\_\_\_\_ Name: \_\_\_\_\_

Gender:  Female  Male Competition Age: \_\_\_\_\_ Competition Rank: \_\_\_\_\_

School # \_\_\_\_\_ Region # \_\_\_\_\_ Instructor: \_\_\_\_\_

Creative Forms  Creative Weapons  XMA Forms  XMA Weapons

Paid: \_\_\_\_\_ (initial)



## ATA Tiger Division

Paid: \_\_\_\_\_ (initial)

ATA # \_\_\_\_\_ Name: \_\_\_\_\_

Gender:  Female  Male Competition Age: \_\_\_\_\_ Competition Rank: \_\_\_\_\_

School # \_\_\_\_\_ Region # \_\_\_\_\_ Instructor: \_\_\_\_\_

ATA Tiger Instructor  
Signature (verify all is correct):  
\_\_\_\_\_

Forms: Name of form: \_\_\_\_\_ ~  Whole Form  Half Form ~  Doesn't Need Help  Needs Help

One-Steps: Name of one-steps: \_\_\_\_\_ ~  #1  #2  #1 & 2 ~  Doesn't Need Help  Needs Help

Weapons  Sparring  Combat  Creative Forms  Creative Weapons  XMA Forms  XMA Weapons

**HOLD HARMLESS AND LIABILITY RELEASE WAIVER AGREEMENT**

I, \_\_\_\_\_, or parent or legal guardian of competitor if a minor, have voluntarily submitted my application for registration in the ATA Regional Tournament. By submitting the application for registration, I certify that I am fully aware of and understand the inherent dangers in participating in activities involving Taekwondo and other martial arts, and of the basic safety rules and procedures. I understand and agree that the organizers of the tournament, the ATA, the tournament officials, or any other contestant will not be responsible for my safety, nor will any of these parties or individuals serve as a guardian of my safety.

I understand and agree that neither this tournament, the organizers of the tournament, the ATA, the tournament directors, officials, their agents, or assigns, or any other individual or entity associated with this tournament or the ATA, may be held in any way for any occurrence, or event in connection with this tournament which may result in injury, death, or any and all damages to me or my family, descendants, heirs, or assigns.

I understand and agree that in consideration of being allowed to be a contestant in this tournament, I hereby personally assume any and all risks involved in connection with this tournament and furthermore, I release forever the aforementioned organizers of this tournament, the ATA, the tournament directors and officials, their agents and assigns, and any other individual or entity associated with this tournament, including any and all risks connected therewith, whether foreseen or unforeseen, including any risks created and/or harm caused by any negligent act (excluding gross negligence or reckless behavior) or acts of any or all of the above-mentioned parties. Furthermore, I will hold harmless the above-mentioned parties from any claim by me, my family, my estate, my heirs, my personal representatives, or there assigns, arising out of my participating and being a contestant in this tournament.

I further state that I am of lawful age and legally competent to sign this agreement, and that my signing this agreement is my own free act (unless this is signed by parent or legal guardian). I also understand and agree that the terms herein are contractual, and that the terms are not a mere recital or simply for informational purposes.

I have read, understood and fully informed myself of the contents of this agreement. I assume my own responsibility, physical condition, and capability to perform under tournament conditions of a championship level Taekwondo tournament.

Signature of Competitor or Parent or Legal Guardian: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_