

# Engum's Academy of Taekwondo

## Tournament Registration Form

**Print clearly and fill out entire form.**

Name: \_\_\_\_\_ Wt \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Rank: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Name of Taekwondo School or Club \_\_\_\_\_ City: \_\_\_\_\_

Taekwondo Instructor: \_\_\_\_\_ Master Instructor: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Circle the event(s) you will participate in:

FORMS

SPARRING

BREAKING

WEAPONS

PRO-BREAKING

### **Liability Waiver and Indemnification Agreement** **Read the Following Before Signing**

I, the undersigned, of the above address, as a registrant and participant in Engum's Academy of Taekwondo Tournament, voluntarily submit my application for attendance and participation and as a part thereof, I fully recognize and acknowledge that this competition frequently involves hard physical contact that might result in injury to myself or others, despite the necessary safety precautions and rules and I enter such competition at my own risk. Therefore, I assume full and complete responsibility for any and all damages, injuries or losses that I may sustain or incur, if any, while attending or participating in the competition. INITIALS \_\_\_\_\_

I do hereby release and further discharge Engum's Academy of Taekwondo, Engum's Taekwondo Association, Extreme Training, Jon Engum, Operators, Officials, or other Competitors, individually and/or otherwise, for any accidents, suits, damages, claims, or judgments that may result in any personal injury that I may sustain while participating in the competition. I realize and acknowledge that I am solely responsible for any medical attention for treatment that I may need as a result or participation in this competition. INITIALS \_\_\_\_\_

I declare that I am free from any physical defects or illness that might prohibit or inhibit my participation in this competition, once again, I acknowledge my full understanding that Taekwondo is a contact sport that may result in injury to myself for which I am covered only by my own medical health insurance. I understand that there is only first aid available at this tournament. I understand that I am required to wear headgear, shin/instep protectors, chest protector, mouth guard, and a groin cup for male competitors. INITIALS \_\_\_\_\_

If I am an adult signing this registration liability waiver, as a parent or guardian of a person under the age of 18 years, I agree to indemnify Engum's Academy of Taekwondo, Engum's Taekwondo Association, Extreme Training, Jon Engum, Operators, Officials, or other Competitors, individually and/or otherwise, from all liability loss or damages that said minor child or I may suffer as a result of claims, demands, costs or judgments arising from any injuries suffered by said child for whom I am signing this liability and indemnification agreement. INITIALS \_\_\_\_\_

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT OR GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_

**MAIL TO: Engum's Academy, 712 Washington St. Brainerd MN 56401**

**POST MARK BY : MARCH 17<sup>th</sup> FEE = \$50. APRIL 3<sup>rd</sup> FEE = \$55 AFTER THAT \$65**

**15 year old and up, brownbelts and high who want to do breaking must add \$10 and get a chance to win \$100. Appropriate Fees must accompany the forms for you to be registered.**