## 2015 Fall PNTA Taekwon-Do Friendship Tournament September 19, 2015 ENTRY FORM

Name:			Rank:			
Address:		Phone:				
City:	State: Sex: M F		Zip:			
DOB:	Sex: M F	- Age:	Weight:			
Instructor:		_School:				
NO REFUNDS. Ma (PLEASE CH	Pre-register by Septer te: \$40 (Add an addition ke checks payable to: B IECK THE DIVISIONS HYUNGS BREAK	nal \$10 for ea Bettencourt's YOU ARE C	ach additional event) Taekwon-Do America OMPETING IN)			
\$40\$10	\$10	\$10	\$10			
Method of paymen	t: Cash Check	cCr	edit Card			
Credit Card Numb	er:					
Exp. Date:	Name on Ca	ırd:				
	WAIVE	₹				
Tournament .I assum losses which I may su claims against the tou injuries including their understand that my er by me or any pictures publicity, promotion or	hereby voluntarily participate full responsibility for an ustain or incur while attending rnament director, sponsor sole or partial negligence attry fee is non-refundable, taken of me in connection television showing, and I bywledge that martial arts of the full responsibility.	pate in the 20 y and all damading or participes, officials, incontheir part to a consent that with the tour waive all com	ages, injuries, deaths or pating. I hereby waive all dividuals, BTA for that I may sustain. I fully tany picture furnished nament can be used for pensation in regard			

Send to: Bettencourt's Taekwon-Do America c/o 11954 NE Glisan St. #433 Portland, OR 97220 503-650-0680

Signature of Parent/Guardian Date

and can result in injury. I am in good health and physical condition to participate in this tournament. I HAVE READ AND FULLY UNDERSTAND THE ABOVE WAIVER.

Date

Signature of contestant

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Name:					F	Rank:
Address:_		Phone: Zip: State: Zip: Sex: M F Age: Weight:				
City:		State:			_Zip:_	
DOB:		Sex:	M F Age	:	Weigh	ıt:
Instructor:			Sch	ool:		
NO REFU	Entry Fee: \$ <sup>2</sup> INDS. Please CHECK TH	e-register by Se l0 (Add an addi make checks p E DIVISION NL UNGS BRE	itional \$10 payable to JMBERS	ofor each Betten	n additi court's E COM	TKD America
\$40	\$10	\$10	\$	10	\$1	0
		CashC				
Exp. Date	e:	Name o	n Card: _			
Tournamen deaths or lo hereby wair individuals, I may susta any picture tournament compensat potentially condition to	at .I assume full bsses, which I reve all claims ag BTA, for injuried in. I fully under furnished by me can be used for in regard the dangerous and	eby voluntarily paresponsibility for may sustain or ingainst the tournaries including their estand that my ende or any pictures or publicity, promereto. I further accan result in injustics tournament.	r any and a cur, while a nent director sole or partry fee is not taken of notion or telecknowledgory. I am in	all damage attending or, sponse rtial neglic on-refunction ne in contraction evision shat man good hea	es, injurior particors, office of delivers of the control of the c	es, bipating. I bipating. I bials, on their part that bonsent that with the and I waive all competition is
Signature o	of contestant	Date S	Signature o	f Parent/0	Guardiar	n Date

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