

January 10th, 2009

(Saturday)

KMAC "Electronic Scoring" TOURNAMENT

Korean Martial Arts Center Fund Raising Event-for school supplies !

DATE: Saturday, January 10th, 2009

TIME: 9:45 AM FOR FORMS / 11:30 AM Olympic "no" equipments /
1:00pm Olympic TKD w/ equipments

LOCATION: 1414 OCEAN AVENUE, S.F., Ca. 94112

DEADLINE: applications must be received by Friday, Jan. 2nd, 2009

NAME: _____
AGE _____ BELT _____ INSTRUCTOR _____
ADDRESS _____
CITY _____ ZIP _____ PHONE _____

Place an "X" next to your competition choice:

FORMS Olympic "no" equipments Olympic TKD w/ equipments

Complete & return this form by Jan. 2nd, 2009 with \$45 for one event, \$10 for each additional event

Event may be cancelled or postponed if participation is low

Medical Plan: _____
Group/ID# _____
Name of Insured _____

EMERGENCY CONTACTS:

Name _____
Relationship to you _____
Address _____

Home phone _____
Work/Cell phone _____

Name _____
Relationship to you _____
Address _____

Home phone _____
Work/Cell phone _____

WAIVER OF LIABILITY OF THE KOREAN MARTIAL ARTS CENTER & ITS INSTRUCTORS, STUDENTS AND LANDLORD:

The undersigned accepts any and all responsibility for, and assumes the risk of any and all injury damage of person, which arises either directly or indirectly from the participation in the activities of this tournament. I hereby expressly release, discharge and hold harmless from any liability whatsoever the instructors, agents, employees, servants, and hosts thereof in their private and individual capacities as representatives of the KOREAN MARTIAL ARTS CENTER, whether salaried or voluntary. I certify that I am familiar with the contents of this waiver and that I have read and understood the same and that it is my intention in signing this waiver that this be binding not only upon me but upon my heirs, administrators, executors, successors and assigns.

Applicant signature _____
Parent/Legal guardian signature (if competitor under 18) _____

Relationship to applicant _____

Date _____