

2008 Maryland AAU Point Sparring Challenge August 23, 2008

Entry Fee: \$45.00 Double Elimination point sparring challenge

Mail competed entry form and fee to: Scott Fiorillo - P.O. Box 959 - Bryans Road, MD 20616

Make check or money order payable to: "SFMA"

Registration Deadline- 8/21/08 - No Registration at the door

Download tournament package at: www.region2tkd.com

PRINT LEGIBLY OR TYPE: Illegible applications will NOT be processed

Athlete Name: _____ AAU membership no. _____

* All athletes MUST be a current AAU member - register online at: www.aausports.org *

Home Phone () _____ - _____ Martial Arts School: _____

Email address: _____

Instructors Name: _____ School Phone: () _____

ATHLETES RANK: (Check the appropriate category)

NOVICE: _____ White _____ Orange _____ Yellow

INTERMEDIATE: _____ Green _____ Blue _____ Purple

ADVANCED: _____ Brown _____ Red

BLACK BELT: _____

EVENT INFORMATION:

Competition Age (as of Aug 31, 2008) _____ Date of Birth: _____ SEX: M F

MM/DD/YYYY

EXACT WEIGHT: _____ LBS.

I hereby certify that I know and understand the rules, policies, and code of conduct for AAU Taekwondo. I certify that I have entered my self/child in the correct age (as of August 31, 2008) and belt grouping and that I/he/she is qualified to compete according to the specifications outlined in the AAU Taekwondo Handbook. I fully understand that any medical treatment given to me will be of a first aid treatment only. I agree to waive any claims against any persons, schools, associations connected with this Championship from any injuries I/my child may sustain and likewise assume full responsibility for all my/my child's actions in connection with the Championship. *If under 18 - must be signed by a parent/guardian.*

Competitor/Parent Signature: _____ Date: _____