

COMPETITOR REGISTRATION FORM

**32<sup>nd</sup> ANNUAL U.S. CENTRAL OPEN TAEKWONDO CHAMPIONSHIP**

**September 28, 2024**

Location: U.S. Central Taekwondo Association Central Gym  
10801 S. Sunnyslane Rd., OKC, OK 73160

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB (m/d/y) \_\_\_\_\_  
 Email \_\_\_\_\_ Wt (lbs) \_\_\_\_\_ Ht (in) \_\_\_\_\_ Gender  M   F   
 Street Address \_\_\_\_\_ Tel (\_\_\_\_\_) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Belt Color \_\_\_\_\_

**SCHOOL/CLUB**

Club \_\_\_\_\_ Instructor's Name \_\_\_\_\_  
 Street Address \_\_\_\_\_ Tel (\_\_\_\_\_) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, the undersigned, hereby waive all claims against In Hui Won, all persons connected with the U.S. Central Open Taekwondo Championship, Tournament officials, Grand Master Won's Taekwondo, and/or the U.S. Central Taekwondo Association for any injuries that I may sustain during my participation in the competition. I also assume full responsibility for any of my actions during and in connection with said tournament.

I further agree that any pictures taken of or by me in connection with the said Championship can be used by the tournament director for publicity or promotion without compensation at this or any other time.

Competitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

If competitor is under 18 years, Signature of Parent/Guardian \_\_\_\_\_

**PLEASE CIRCLE or check YOUR EVENTS:**

**\*\*Event times may change by +/- 1 hour\*\***

<b>Kyorugi (Sparring)</b>	<b>Poomsae (Forms)</b>	<b>Point Sparring</b>	<b>Breaking (Power or Technical)</b>
<b>Team Poomsae Self</b>	<b>Couple Poomsae</b>	<b>Creative Poomsae</b>	<b>Weapons</b>
<b>Defense (Hapkido)</b>	<b>Step Sparring (Hapkido)</b>	<b>Long Fall (Hapkido)</b>	<b>High Fall (Hapkido)</b>
<b>Double Roundhouses</b>	<b>Demo Team</b>		

**SPECIAL NEEDS:**

**Para Poomsae (Forms)      Para Kyukpa (Breaking)**

**PRE-REGISTRATION & ENTRY FEE**

Pre-registration received by: September 25, 2024  
 \$85 for any one event  
 \$35 for each additional event  
 Late Fee: add \$25 at the door

**MAKE CHECKS PAYABLE TO:**

U.S. Central Taekwondo Association  
 Email to: **gmwons@gmail.com**  
 Mail to: 10801 S. Sunnyslane Road  
Oklahoma City, OK 73160  
 Tel. (405) 793-0752      Fax (405) 794-0768

**REFUND PROCESSING FEE IS \$25 or FULL APPLICATION FEE MAY BE APPLIED TO NEXT TOURNAMENT**

**If paying by credit card: [or pay credit card by phone by calling (405) 793-0752] \*\* (or Zelle info should be online soon)**

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_  
 Cardholder's Name \_\_\_\_\_ Card Type \_\_\_\_\_ Amount \_\_\_\_\_  
 Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_  
 Cardholder's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_