

COMPETITOR REGISTRATION FORM  
**40th ANNUAL OKLAHOMA INVITATIONAL TAEKWONDO  
HANMOOKWAN CUP CHAMPIONSHIP**

**March 1, 2025**

Del City Middle School 2300 Linda Ln • Del City, OK 73115

Name \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Email \_\_\_\_\_ Age \_\_\_\_\_ Wt (lbs) \_\_\_\_\_ Ht (in) \_\_\_\_\_ Sex  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 40<sup>th</sup> Annual Oklahoma Invitational Taekwondo Hanmookwan Cup Championship, Tournament officials, Grand Master Won's Taekwondo, the U.S. Central Taekwondo Association, and/or Hanmookwan 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\*\***

<small>Olympic</small> <b>Kyorugi (Sparring)</b>	<b>Demo Team (teams of 3+)</b>	<b>Couple Poomsae</b>	<b>Creative Poomsae</b>
<b>Official Poomsae (Forms)</b>	<b>Breaking</b>	<b>Team Poomsae</b>	<b>Weapons</b>
<b>Double Roundhouses</b>		<b>Family Poomsae</b>	

**SPECIAL NEEDS:**

**Para Poomsae (Forms)**

special needs only

**Para Breaking**

special needs only

**PRE-REGISTRATION & ENTRY FEE**

Pre-registration received by: February 26, 2025  
\$85.00 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. Sunnylane 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]**

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