

The 6th BongRimGi All U.S. Kumdo Championship

TOURNAMENT DATE : Saturday, August 19, 2006 TIME : 8:00am - 8:00pm

PLACE : Queensborough Community College Gym

222-05 56th Avenue Bayside, NY 11361

TOURNAMENT & SEMINAR ENTRY FORM

Please Print (in English)

NAME(Last, First) _____

D.O.B.(mm/dd/yy) _____ Age : _____ Sex : M / F

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE_() _____

KUMDO RANK _____ (KEUP / DAN) ISSUED DATE _____

DOJANG(SCHOOL) _____

THE MASTER: _____ (Signature) _____

INDIVIDUAL DIVISIONS(Check One):

- | | | |
|--------------------------------------|----------------------------------|---|
| 1) CHILDREN A(AGE 10 & UNDER) _____ | 2) CHILDREN B(AGE 11 - 12) _____ | |
| 3) YOUTH A (13 - 15) _____ | 4) YOUTH B(16 - 18) _____ | |
| 5) GIRLS (13 - 15) _____ | 6) WOMEN(16 & UP) _____ | |
| 7) MOODANJA(UNDER BLACK BELT) _____ | 8) JANG-NYUN(40 & UP) _____ | |
| 9) 1 ST DAN _____ | 10) 2 ND DAN _____ | 11) 3 RD DAN AND ABOVE _____ |

SEMINAR : Sunday, August 20, 2006 9:00am - 5:00pm. Seminar Attending : Yes _____ No _____

**ENTRY FEE : \$40 (Lunch will be provided)

Liability Waiver: In consideration of my participation in the 6th BongRimGi All U.S. Kumdo Championship, I do hereby, for myself, my heirs, and executors, waive, release and forever discharge any and all rights, claims for damages which I may have occur to me against the Eastern U.S. Kumdo Federation, the 6th BongRimGi All U.S. Kumdo Championship and its organizing committee, Queensborough Community College and its employees, and all members of the Championship, or their respective officers, committees, medical staff, agents, representatives, successors, and /or assignees and against any competitor for any all damages which may be sustained by me in connection with my association with or entry in the above athletic meet, or which may arise out of traveling to, participating in, and returning from this athletic. I understand that Kumdo is a sport, which involves a risk of injury. If I fail to appear or compete at the competition, I knowingly forfeit all applicable registration fees. I hereby agree to all the terms and conditions of the liability waiver above.

Signature of Applicant Date Signature of Parent (if Minor Applicant) Date