

Olympic Sparring Clinic with Dana Hee – Registration Form

Friday, January 27, 2012

Cap City Fitness Center – Capitol City Baptist Church- 5990 NE 14th St - Des Moines, Iowa 50313

Time: 5:00 – 9:00 p.m., as noted below – Clinics are open to ALL RANKS.

Name (please **print**) _____

Male/Female _____ Age _____ Belt Rank _____ Height _____ Weight _____

Address _____

City/State/Zip _____

Email: _____

You are responsible for your own sparring gear. All USAT rules pertaining to equipment will be adhered to. Make sure you have the “new” style of hogu! If you have questions about your gear, go to the USAT website and see what the rules are. Wrong gear? You won’t play, and you won’t receive a refund.

Mouth guard, Shin/Insteps, Head Gear and Hogu is required for all competitors; in addition a groin cup for males is REQUIRED!

How old are you? 11 and under _____ 12-17 _____ 18 and over _____
(5:30 – 6:15 pm) (6:30 – 7:30 pm) (7:45 – 8:45 pm)

TKD School Name: _____ Instructor: _____

WAIVER OF LIABILITY

“In consideration of your acceptance of my entry, I do hereby for myself, my heirs, executors and administrator, waive, release and forever discharge any and all rights and claims for damages, criminal or civil, for which I have or may accrue to me, against Voorhees TKD LLC, Two Rivers Invitational Taekwondo Tournament, Des Moines Public Schools, the Des Moines Parks and Recreation Department, the City of Des Moines, Cap City Fitness, Capitol City Baptist Church, USA Taekwondo, Inc., and all members of the event, or their respective directors, co-directors, officers, agents, representatives, successors, and/or assigns, against any competitor for any and all damages, physical, emotional or psychological, which may be sustained by me in connection with any association with or entry in the above athletic meet, or which may arise out of traveling to, participating in, and returning from such athletic meet. I understand that Taekwondo is a body contact sport, and I further understand all the contents of the 2012 rules and general information which was published by the sponsors and I agree with them in their entirety.”

Competitor’s/Parent’s Signature ¹ : _____	Date: _____
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¹*If participant is under 18 years old, parent or legal guardian must sign above!*

Age Groups/Clinic times, and registration fee:

- 1) Ages 11 and under – your clinic is from 5:30 – 6:15 pm
- 2) Ages 12-17 – your clinic is from 6:30 – 7:30 pm
- 3) Ages 18 and over – your clinic is from 7:45 – 8:45 pm
- 4) Clinics are limited to the first 30 people that register in each session.
- 5) Make sure you have a Completed and signed Clinic Registration Form signed by the appropriate individual.
- 6) Clinic registration fee in the form of check or money order payable to Voorhees TKD LLC is:
 - a. \$25, postmarked by 1/14/12 – check or money order.
 - b. \$50 if registering at the door of the clinic.

Mail this completed form, and registration fee to: Voorhees TKD LLC
Dana Hee Sparring Clinic
5215 NW 4th St
Ankeny, IA 50023-8006.

ALL entries postmarked by no later than **Saturday, Jan. 14, 2012** are required in order to receive pre-registration pricing.
OR – register online by going to www.voorheestkd.com, and clicking on the “Dana Hee Sparring Clinic” link.

There will be no refunds of registration fees for any reason, including inclement weather.

These clinics will be held regardless of the weather.

Important!

- Provide the appropriate signature on the registration form/liability waiver.
- Make sure parent/guardian signature is on entry form for minor children.
- *If mailing in registration, payment for the clinic fee must be check/money order made out to Voorhees TKD LLC.*
- *Credit Card payment with online registration only. Mail-in or at-the-door registration must be cash, check or money order.*