

# 2015 Region 10 Tae Kwon Do Championship National Qualifier



Saturday, April 11, 2015

La Cueva High School  
7801 Wilshire Ave NE  
Albuquerque NM 87122



- **Forms**
- **Breaking**
- **Olympic Sparring**
- **Point Sparring**
- **Electronic Scoring**
- **Matted Rings**
- **Beautiful Custom Medals**
- **AAU Sanctioned Event**
- **AAU Jr. Olympic & National Qualifier**
- **Special Needs Forms/Breaking**



**Host Hotel:**

**Comfort Inn & Suites**

**Free Hot Breakfast**

**ONLY \$64 + tax per night**

5811 Signal Ave NE

Albuquerque, NM 87113

(505) 822-1090

Reservations must be made by April 1, 2015

**Weigh In/Credential Pick up:**

- Friday from 4 - 7 p.m. at host hotel
- Saturday from 8 - 9 a.m. at the tournament

**Pre-registration deadline April 1, 2015**

**For More Information Contact Master Antionette Chavez**

**Region 10 Director**

**(505) 294-6302, [tmkalc@aol.com](mailto:tmkalc@aol.com)**

This event is licensed by the Amateur Athletic Union of the U.S., Inc.

All participants and coaches must have a current AAU membership. ([aausports.org](http://aausports.org))

AAU membership may not be included as part of the entry fee to the event.

AAU Athlete membership must be obtained before the competition begins.

**BE PREPARED!** Adult and Non Athlete memberships are no longer instant and cannot be applied for at event.

Please allow at least 10 days for membership to be processed.



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Individual Competitor's Registration Form

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_
Street Address \_\_\_\_\_
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_
Phone \_\_\_\_\_ Email \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_
Weight \_\_\_\_\_ Height Male \_\_\_\_\_ Female \_\_\_\_\_ AAU Number \_\_\_\_\_

Price: \$65.00 for 1 event, each additional event \$10 per event.

Money order or cashier's checks only. Please no school checks will be accepted. Mail to Takai Mine Karate/Tae Kwon Do, 1027 Juan Tabo NE, Albuquerque, NM. 87112, by April 1, 2015 without penalty. \$15.00 late registration fee if received after April 1, 2015

Novice: White \_\_\_\_\_ Yellow \_\_\_\_\_ Orange \_\_\_\_\_
Intermediate: Green \_\_\_\_\_ Blue \_\_\_\_\_ Purple \_\_\_\_\_
Advanced Red \_\_\_\_\_ Brown \_\_\_\_\_ 1st, 2nd Gups/Kyu \_\_\_\_\_
Black Belt: Rank \_\_\_\_\_

Event(s): Please place a check mark in the appropriate event(s) you are competing in. Forms \_\_\_\_\_
Olympic Sparring \_\_\_\_\_ Point Sparring \_\_\_\_\_
Adult Team Point Sparring \_\_\_\_\_
Breaking \_\_\_\_\_ (Maximum of 3 Breaks)
Special needs Breaking \_\_\_\_\_ Special needs forms \_\_\_\_\_

Pre-purchase Spectator passes for \$5 (\$10 if purchased at the door)

QTY \_\_\_\_\_ Total Amount \$ \_\_\_\_\_

Form of Payment \_\_\_\_\_ Total Amount Paid \_\_\_\_\_

Martial Arts School \_\_\_\_\_ Instructor \_\_\_\_\_ Phone \_\_\_\_\_
School address \_\_\_\_\_ School email \_\_\_\_\_

Liability Waiver

I, the undersigned, for myself, my heirs, administrators and assigns, do hereby covenant and agree as follows. I hereby assume all risk of any personal injury which may result from activities in which I engage at the 2015 Region 10 AAU Championship including supervised and unsupervised activities; that I for myself, my heirs, administrators and assigns, do hereby release Master Antionette Chavez, Takai Mine Karate, La Cueva High School all coaches, officials, individually or collectively, from all liability, including claims at law or in equity for any injury, fatal or otherwise, mental or emotional damages, which may result directly or indirectly from my traveling to, participating, or returning from set tournament or related functions. I understand that Tae Kwon Do/Martial Arts is a contact sport with a risk of serious injury, possibly death, to me, or my children who may enter said tournament. I also assume all risk of my personal property at the tournament premises if lost or stolen. I also understand that there are no refunds.

I have read and fully understand the above waiver and agree with its terms.

Signature of competitor if 18 or older: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Legal Guardian if under 18 yrs. of age: \_\_\_\_\_ Date: \_\_\_\_\_