

2018 ULTIMATE CHALLENGE

ATHLETE REGISTRATION FORM

MAIL FORMS TO: UTTC, 1843 CALUMET AVE, WHITING, IN 46394 (ONE FORM PER COMPETITOR)

COMPETITOR NAME _____ AGE _____ WEIGHT _____

MALE _____ FEMALE _____ RANK _____

ADDRESS _____ PHONE _____

EMAIL _____ (competitor must fill out all info to qualify for Peak Camp drawing)

SCHOOL NAME _____ INSTRUCTOR _____

ADDRESS _____ PHONE _____

E-MAIL ADDRESS _____

FORMS _____ SPARRING _____

COMPETITION BEGINS AT 10:00 AM

WHITING HIGH SCHOOL * 1751 OLIVER STREET * WHITING, IN 46394

PRE REGISTER AND SAVE \$\$\$

EARLY REG: ONE / TWO EVENT(S) (by 9.01.18) **\$69.00**

ONE / TWO EVENT(S) (after 9.01.18) **\$79.00**

REGISTER AT DOOR – CASH ONLY
ONE/TWO EVENT(S) **\$89.00**

REGISTER AT DOOR FROM 8:00 AM TO 9:30 AM

COMPETITORS MAY PICK UP CREDENTIALS AT DOOR

Credit Card Type: VISA MASTER CARD

Credit Card Number: _____ Exp Date: _____

Name on Card: _____ Zip Code: _____

Billing Address: _____

Signature: _____ CVV: _____

**Please make cashier's checks or money orders payable to:
Ultimate Taekwondo Training Center**

**MUST BE POSTMARKED BY SEPTEMBER 01, 2018 FOR EARLY REGISTRATION
NO PERSONAL CHECKS - NO REFUNDS**

LIABILITY WAIVER

In consideration of your acceptance of my registration, I do hereby, for myself, my heirs, executors and administrators wave, release and forever discharge any and all rights and claims for damages which I may have, or which may occur to me, against the Ultimate Taekwondo Training Center, Inc, or its directors, and for Whiting High School or any of its affiliates, and or any and all members or the tournament or their respective officers, agents, representatives, and or assigns, and against any competitors for any and all damages which may be sustained by me in connection with my association with my participation in or entry in the above athletic event and c competition, and in connection with any medical services that may be provided in connection with any such injury or illness. I understand this is a full contact sport and can cause injury or death and I take full responsibility for myself, son, daughter. I further understand that I may be dismissed from the premises without compensation or refund if my conduct is not courteous and cooperative for the successful operation of the tournament. I understand that my photos taken at this event maybe used by Ultimate Taekwondo Training Center, Inc. for promotional purposes without compensation.

Contestant's Signature

Date

Parent/Guardian Signature

Date