

2024 OFFICIAL COMPETITOR REGISTRATION FORM



30th Annual Santa Cruz Open Tae Kwon Do Championship

March 16, 2024

**Watsonville High School
250 E. Beach St.
Watsonville, CA 95076**

Registration Checklist

- Complete this Form
- Sign Liability Release Waiver
- Write cashier's check or money order to:
Korean Martial Arts Academy

Admission: \$20.00
(Under age 5 and under Free)

1. Competition Events and Fees

Check the event in which you will participate:

<input type="checkbox"/> 1 Event \$100	<input type="checkbox"/> Kyorugi (Sparring) K-_____
<input type="checkbox"/> 2 Events \$120	<input type="checkbox"/> Poomse (Forms) P -_____
<input type="checkbox"/> 3 Events \$140	<input type="checkbox"/> Open Forms O-_____
<input type="checkbox"/> 4 Events \$160	<input type="checkbox"/> Weapon Forms W-_____
<input type="checkbox"/> 5 Events \$180	<input type="checkbox"/> Synchronized Poomsae S -_____
	3 partners: (Names)
<input type="checkbox"/> 6 Events \$200	<input type="checkbox"/> Power Hand Breaking HB-_____
	<input type="checkbox"/> 3 Direction Breaking DB-_____

NO REFUND

Check Box	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
	White/Yellow/Orange	Green/Blue/Purple	Red/Brown	Black/Deg

2. Competitor Information

First: _____ Last: _____ MI: _____

Gender: Male Female DOB: ___/___/___ Age: _____

Height: ___ft___in Weight: _____#

Home Address: _____

City: _____ State: ___ Zip: _____

Email: _____

Home Phone: () _____ Day Phone: () _____

3. If Under 18 years of age

Parent/Guardian: _____ Phone: () _____

4. Studio/Do Jang Information

Studio/Do Jang: _____

Master/Instructor: _____

Address: _____ City: _____

State: ___ Zip: _____ Email: _____

Phone: () _____ Fax: () _____

5. Further Instructions

- ✓ Applications must be received no later than March 13, 2024.
- ✓ Applications received after March 13, will result in a 30 late fee.
- ✓ Attach cashier's check or money order made to Korean Martial Arts Academy.
- ✓ Send registration to: **Korean Martial Arts Academy**

3702 Portola Drive, Santa Cruz, CA 95062

Phone: (831) 476-5555 Fax: (831) 476-2599

Website: www.santacruzopentkd.com

Email: santacruzopen@hotmail.com

REGISTER ONLINE