



# ICTF Southern Canadian Taekwon-Do Championship



June 11th, 2011 at Vellore Village Community Centre  
1 Villa Royale Avenue • Woodbridge, Ontario • L4H 2Z7 • 905-832-8544

## INDIVIDUAL REGISTRATION FORM

To be completed and returned by May 28th, 2011.

FIRST NAME		LAST NAME	
SEX	<input type="checkbox"/> M <input type="checkbox"/> F	AGE	BELT
ADDRESS		CITY, PROVINCE	POSTAL CODE
TELEPHONE NUMBER		MEMBERSHIP CARD NUMBER	
INSTRUCTOR NAME		DOJANG	
<p>I, _____ hereby submit my application for registration in this tournament event. I agree to waive all claims against any person (s) connected with the tournament, for any injury I may sustain during the tournament. I hold myself responsible for my own actions and promise to act according to the rules and regulations of the tournament. I further agree that any pictures taken of me or by me in connection with the tournament may be used by Tournament Director for promotion without compensation at this or any future time.</p>			
APPLICANT'S SIGNATURE		PARENT'S SIGNATURE IF UNDER 18 YEARS OLD	

East 6029 Old Church Road, Caledon East, Ontario • Tel: 416-825-6235 • E-mail: swartaekwondo@rogers.com  
Fee: \$50 CDN per competitor for one or two events. (cheques are to be made payable to S.W.A.R. Taekwon-Do)

### PATTERNS COMPETITION (TUL)

NAME	BELT
AGE	SEX <input type="checkbox"/> M <input type="checkbox"/> F
DOJANG	INSTRUCTOR

### SPARRING COMPETITION (MATSOGI)

NAME	BELT
AGE	SEX <input type="checkbox"/> M <input type="checkbox"/> F
DOJANG	INSTRUCTOR