

AAU Kentucky State Championship



May 12th, 2012

Doors open at 7:30
Coaches meeting at 9:30
Opening ceremonies begin 10:00

Sanctioned by the AAU

AAU TaeKwonDo Kentucky District Championship
~Athlete Registration Form~

Mail Completed Form Along with Payment (Money Order – NO Checks) to:
Shannon Blevens Wiehoff, 2486 Landview Drive, Covington, KY 41017
PRE-REGISTRATION PRICE = \$55.00 for 2 events
IF POSTMARKED BY April 29th, 2012

Postmarked after April 29th – Add a \$20 late fee. Late registrations will also be accepted at the door for an additional \$15 fee (total \$90).

Last Name: _____ First Name: _____ M.I.: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Email Address: _____
Age: _____ (As of Aug 31st, 2012) Weight: _____ Male/Female: _____ Rank: _____
TaeKwonDo School: _____ Birth Date (mm/dd/yyyy) _____
Instructor: _____ Phone Number: _____

***Your 2012 AAU Membership Number:** _____

*Please note: This application will be rejected without your 2012 AAU membership number.

You may register online at www.aasports.org to receive your 2012 AAU membership number.

Please have your 2012 card or a copy of your 2012 card available at the door.

***Please mark the level of competition you are entering:**

*You may compete at ONLY ONE level of competition.

Junior (5-17) _____ Senior (18-32) _____ Executive (33-42) _____ Ultra (43-Up) _____

***Please mark the events you are entering:**

Individual Forms: _____

Olympic Sparring: _____ **Point Sparring:** _____

*You must choose EITHER Olympic OR Point Sparring

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 2012 AAU Kentucky TaeKwonDo District Championship, including supervised and unsupervised activities, that I for myself, my heirs, administrators and assigns, do hereby release the Amateur Athletic Union, Turkey Foot Middle, Kenton County Board of Education, Shannon Wiehoff, 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 in, or returning from said tournament or related functions. I understand that TaeKwonDo is a contact sport with a risk of serious injury 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 there are absolutely no refunds. I have read and fully understand the above waiver and agree with its terms.

Competitor Signature

Date

Signature of Parent or Guardian if under 18 years of age

Date

AAU TaeKwonDo Kentucky District Championship
~Coach Registration Form~

Mail Completed Form Along with Payment (Money Order – NO Checks) to:
Shannon Blevens Wiehoff, 2486 Landview Drive, Covington, KY 41017

As coaches and officials are vital to the success of any tournament, we would like to invite our coaches to pre-register by May 1st, 2012, at no charge.

Postmarked after May 1st – Add a \$10 late fee. Late registrations will also be accepted at the door.

Last Name: _____ First Name: _____ M.I.: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Email Address: _____
Age: _____ (As of Aug 31st, 2011) Rank: _____
TaeKwonDo School: _____ Birth Date (mm/dd/yyyy) _____
Instructor: _____ Phone Number: _____

***Your 2012 AAU Membership Number:** _____

*Please note: This application will be rejected without your 2012 AAU membership number.
You may register online at www.aausports.org to receive your 2012 AAU membership number.
Please have your 2012 card or a copy of your 20121 card available at the door.

****Your 2012 AAU Coaches Number:** _____

****You must complete the online Coaches clinic for 2012 to coach at this event.**

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 2012 AAU Kentucky TaeKwonDo District Championship, including supervised and unsupervised activities, that I for myself, my heirs, administrators and assigns, do hereby release the Amateur Athletic Union, Turkey Foot Middle, Kenton County Board of Education, Shannon Wiehoff, 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 in, or returning from said tournament or related functions. I understand that TaeKwonDo is a contact sport with a risk of serious injury 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 there are absolutely no refunds. I have read and fully understand the above waiver and agree with its terms.

Competitor Signature

Date

Signature of Parent or Guardian if under 18 years of age

Date

AAU TaeKwonDo Kentucky District Championship
~Officials Registration Form~

Mail Completed Form to:
Shannon Blevens Wiehoff, 2486 Landview Drive, Covington, KY 41017

Last Name: _____ First Name: _____ M.I.: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Email Address: _____
Your Current Rank: _____ Referee Level: _____
TaeKwonDo School: _____
Address: _____ Phone Number: _____

***Your 2012 AAU Membership Number:** _____

*Please note: This application will be rejected without your 2012 AAU membership number.
You may register online at www.aausports.org to receive your 2012 AAU membership number.
Please have your 2012 card or a copy of your 2012 card available at the door.

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 2012 AAU Kentucky TaeKwonDo District Championship, including supervised and unsupervised activities, that I for myself, my heirs, administrators and assigns, do hereby release the Amateur Athletic Union, Turkey Foot Middle, Kenton County Board of Education, Shannon Wiehoff, 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 in, or returning from said tournament or related functions. I understand that TaeKwonDo is a contact sport with a risk of serious injury 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 there are absolutely no refunds. I have read and fully understand the above waiver and agree with its terms.

Competitor Signature

Date

Signature of Parent or Guardian if under 18 years of age

Date