THE 2008 24th TCAAT MARTIAL ARTS CHAMPIONSHIP
Official Entry Form

Name:_____Sex:_____Age:_____Phone:_____
Address:_____City:_____State:_____Zip:_____
Year of Training:_____ E-mail:_____

Martial Arts School:_____ Instructor_____
Address:_____ City:_____ State:_____ Zip:_____
Phone:_____ E-mail:_____

DATE: June 7th, 2008
Location: Sunnyvale Fremont High School 1279 Sunnyvale-Saratoga Rd. Sunnyvale, CA 94087

REGISTRATION

PRE-REGISTRATION DEADLINE is MAY 25th, 2008
Mail all registration forms and make checks **payable to**:
WORLD KUNG FU FEDERATION 20 41ST Ave. San Mateo, CA 94403
!!! PLEASE MAIL ALL REGISTRATION FORMS A.S.A.P. !!!

FEE

	Pre-Registered	After May 25th Before May 31st	
REGISTRATION FEE & 1st EVENT … ……	**$40**	**$50**	**$_____**
GROUP EVENT (5 or more persons) ……	**$40/each**	**$50**	**$_____**
EACH ADDITIONAL EVENT … … … ……	**$15**	**$20**	**$_____**
ALL-AROUND CHAMPIONSHIP… ……	**$130**	**$145**	**$_____**
		TOTAL	**$_____**

NOTE: NO registration forms will be accepted **AT THE DOOR.** No refunds after registration except for cancelled events.

WAIVER

LIABILITY WAIVER: (*Read Carefully and Sign)*
I, the undersigned, due hereby voluntarily submit my application for attendance and participation in the said Martial Arts Tournament and hereby assume full responsibility for any and all damages, injuries, or losses that I may sustain. I fully understand that any medical treatment given to me will be of a first aid type only. I do hereby for myself, my heirs, executors, administrators, parents and guardians assign, release, acquit and forever discharge Taiwanese & Chinese American Athletic Tournament, World Kung-Fu Federation U.S.A. Shaolin Culture Center, U.S.A. Kung Fu Studio, all of their subsidiaries, officers, employees, volunteers from any and all liabilities, actions, claims, demands, or suits whatsoever, which I may now adhere after have or claim to have, on account of injury sustained and suffered by me in connection with said medical assistance and treatment. I consent that any pictures furnished by me or any pictures or videos taken of me, in connection with the Tournament can be used for publicity, promotion, or television show, and I waive compensation in regards thereto. If under 18, this release and consent must also be signed by parents or guardian.

_____ _____ _____
Competitor Signature Parent/Guardian under 18 Date

WWW.SHAOLINKUNGFU.COM TEL: (650) 574-9988
WWW.TCAAT.ORG TEL: (408) 747-0394
WWW.USAKUNGFUSTUDIO.COM TEL: (510) 769-8018