NOVA SCOTIA I.T.F. TAEKWON-DO OPEN CHAMPIONSHIP

May 2nd 2015, SACKVILLE, NOVA SCOTIA

INDIVIDUAL REGISTRATION FORM (Please Print)
NAME:	
DOJANG:	
HOME ADDRESS:	
CITY:	
PROVINCE:	
POSTAL CODE:	
AGE: GENDER: (M) (F)
BELT:	
INSTRUCTOR:	
I, hereby sul	bmit my application for registration in the
Nova Scotia I.T.F. Taekwon-Do Championship Taekwon-Do Federation. I agree to waive all c	
the tournament, for any injury that may be su	
responsible for my own actions and promise to	•
the tournament and the International Taekwo	e e
Tournament Director for publicity of promoti	on may use any picture taken of me or by me
in connection with the tournament without co	mpensation at this or any future time.
Applicant's Signature:	
Parent's Signature:	(If applicant is under 19
	(If applicant is under 18
years) FEE: \$45.00 1 or 2 events.	
PATTERN (TUL) Name:	Age:
Gender: (M) (F) Belt:	
Dojang: Instruct	
SPARRING (MATSOGI) Name:	Age:
Gender: (M) (F) Belt:	_
Weight: Kg Dojang:	
Instructor:	