



Washington State

October 13, 2018

Governor's Cup

Taekwondo Championship

Participation Waiver

Participant agrees to read and follow the rules and regulations of the WA State Governor's Cup Taekwondo Championship. Rules and Regulations can be found at WAGOVCUP.COM or email WAGOVCUP@GMAIL.COM for additional information. Organizing committee reserves the right to refuse entry and remove participating from event venue during this event.

NAME: _____		
First	Last	MI
Address: _____ Apt: _____		
City: _____ State/Province: _____		Zip: _____
Phone: (____) _____	Age: _____	Circle: Male/ Female
E-Mail Address: _____		
Circle all that apply: Competitor Coach Master/VIP Volunteer Vendor Other: _____		
Current Belt Rank: _____		Kukkiwon # _____
School Representing: _____		Location: _____

REALSE AND INDEMNITY:

I, the undersigned, submit this application as consideration for my right to participate in the 2018 Washington State Governor's Cup Taekwondo Championship, to be held October 13, 2018 at Saint Martin's University Marcus Pavilion, Lacey, WA. I understand that I must leave the ring immediately after my competitor or I finish their match. In this way we can control the tournament area and safety. The organizing Committee reserves the right to suspend this pass or remove me from property if I do not cooperate with the tournament rules and guidelines without refund. I understand and appreciate that physical injury and related damages are an inherent and necessary risk of participation in the sport of Taekwondo and Martial Arts. I expressly assume all such risks. I agree to follow the rules and regulations of the U.S. Martial Arts Center and Washington State Governor's Cup Taekwondo Championship. I accept full responsibility for the cost of medical and/or other treatment for any injury or damages, which I may sustain. I release hold harmless and waive all claims against the promoters, operators and sponsors, individually or collectively, for any and all injury or damage I may sustain while attending or participating in this championship, including any claim for negligent supervision, instruction and/or maintenance of the facilities. I consent that any pictures furnished by me or any pictures or images of me in connection with the event can be used for publicity, promotion or video showing, and I waive all compensation in regard, thereto. In addition, I will not print, publish, post or rebroadcast any images, video or recording at the 2018 Washington State Governor's Cup Taekwondo Championship without the permission and written consent of the organizing party and committee and will agree to any penalties in unauthorized publication. I also consent to a background check. This is a private event. Organizing committee has the right to refuse entry or admission. No refund and all financial transactions are final.

If under 18, this release and consent must be signed by a parent or guardian to compete and participate at the 2018 WA State Governor's Cup Taekwondo Championship

Parent / Guardian Signature: _____ Date: _____

Parent/Guardian Name (print): _____

Participant's Signature: _____ Date: _____

Participant's Name (print): _____