



16th Annual Master Yoo's Tae Kwon Do Championship

Saturday, November 7, 2026, at the Westfield Middle School Gym



COMPETITOR REGISTRATION FORM

All competitors must be preregistered. **All applications must be received by Thursday, October 29, 2026.**

Please note that **NO LATE APPLICATIONS WILL BE ACCEPTED!**

First Name:

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 MI:

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Last Name:

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Parent
Information:

Parent Name:

Primary Phone: ()

Secondary Phone: ()

Email:

****APPLICATION WILL NOT BE PROCESSED WITHOUT INFORMATION BELOW****

Date of Birth:
(M/D/YY)

/ /

Age:

(on 11/7/26)

Gender:

(circle)

MALE

FEMALE

Belt Rank:

(on 11/7/26)

Height:

(in inches)

*Weight:

(*if sparring)

Medical
Information:

Please complete the following. Circle (Y) for Yes or (N) for No.

1. Do you have any allergies to medications? Y N

If YES, please indicate which medications:

2. Do you take any medications regularly? Y N

If YES, please indicate which medications:

3. Do you wear contact lenses? Y N

4. Do you have a history of any of the following conditions?

A. Epilepsy (seizures) Y N

D. Diabetes Y N

B. Lung disease Y N

E. High blood pressure Y N

C. Heart disease Y N

If you answered YES to any part of question #4, please complete question #5.

5. I hereby state that I am under the care of a physician for the treatment of

and that I have been medically cleared by that physician to participate in this tournament.

Events:

Check the events in which you will be participating:

☐ **FORMS (\$50)**

☐ **BREAKING (\$60)**

☐ **SPARRING (\$50)**

Total amount enclosed: \$ _____

Make checks payable to "Master Yoo's Tae Kwon Do"

Liability Waiver: In consideration of your acceptance of my entry, I do hereby, for myself, my heirs, executors, and administrators, waive, release, and forever discharge any and all rights and claims for damages that I may have, or that may accrue to me, against Master Yoo's World Class Tae Kwon Do Center or its directors; the 2026 Master Yoo's World Class Tae Kwon Do Championship or its directors, and all members of the championship committee, as well as their respective officers, agents, representatives, successors, and/or assigns, and against any of my competitors, for any and all damages that may be sustained by me in connection with my association with or entry in the above championship and competition, or in connection with any medical services that may be provided to me for any such injury or illness, or that may arise out of traveling to, participating in, or returning from this championship. I understand that Tae Kwon Do is a body-contact sport, and I further understand all the contents of the 2026 rules, regulations, and general information for the championship, and I agree to comply with them in their entirety. I further understand that I may be dismissed from the premises without compensation or refund if my conduct is not courteous and cooperative or interferes with the successful operation of the event. If I fail to appear at the competition at the appropriate time, I knowingly forfeit all registration fees and any opportunity to receive an award or placement associated with participation in the event. **I hereby certify that I have read and understand the above information, and that my responses are true and accurate to the best of my knowledge.**

Contestant's Signature: _____ Date: _____

(Parent/Legal Guardian's Signature if contestant is under 18)