10th US International Wushu-Kungfu Tournament
Registration Form

(Please Print Clearly – All Fields Required)

First Name | MI | Last Name

Gender M/F_____ Birth Date_____ Years of Experience _____ Phone _____

Home Address _____City/State/Zip_____

Is this your first time competing in this tournament? Y/N_____ Were you born in 2009 or later? Y/N _____

Email

Martial Arts School Name _____

Address_____

Instructor_____ School Phone_____

School Email_____ Website_____

Enter division and event code below (1 code per box). Visit www.zhaochangjun.net for **Codes**, **RULES** and **NOTES.**

Division		Code					

Please review this form carefully. Once submitted, each event change to your registration will incur a processing fee of $25.00.All fees are non-refundable.

$90 Early Registration (1 event)…….Must be postmarked by 4/30/2019…… $_____

$110 Registration (1 event) for registrations postmarked after 4/30/2019 or received at the door. $_____

Additional Single/Pair Events $20.00 each [20×] = $_____

All-Around Event (only available in youth and young adult groups) $30 $_____

General Admission: $20.00 each, including Master Performance [$20×] = $_____

Total $_____

Payment must accompany entry form **$30 fee for returned checks**

Make checks payable to: Zhao Changjun Wushu Academy **NO REFUNDS**

Liability waiver: Please read carefully and sign

I, the undersigned, knowingly and without duress, do voluntarily submit my entry to the 2019 US International Wushu-Kungfu Tournament. I hereby assume all risk of physical and mental injuries, disabilities, and losses which may result from or in connection with my participation in the Tournament. Acting for myself, my heirs, personal representatives and assignees, I do hereby release the organizer Zhao Changjun Wushu Academy of America, its officers, agents, representatives, servants, employees, volunteers, and all other members from liability due to any injuries incurred and any resulting legal claims, actions, suits or controversies. I also understand that there is risk of injury involved in all competitive divisions, particularly in fighting events, and I assume full responsibility for all my actions, activities or omissions during and in connection with the Tournament. I fully understand that any medical attention or treatment afforded me by Zhao Changjun Wushu Academy of America, its officers, agents, representatives, servants, employees, volunteers, and all other related members will be of the first aid type only, and I hereby release Zhao Changjun Wushu Academy of America, its officers, agents, representatives, servants, employees, volunteers, and all other related members from any liability for such aid. I have read, understand, and agree to abide by the rules of this event, and accept all responsibility and associated liability for infringement of such rules. Additionally, I am fully aware of my personal medical condition and hereby certify that I am mentally and physically fit to compete. I consent to the use of photographs and/or video recordings of my participation in this event for promotional purposes, and hereby waive my rights to any form of compensation or claim. Parent or legal guardian signature is required if participant is under eighteen (18) years of age.

SIGNATURES:

Participant (required) **Parent/Guardian under 18** **Date**

Please send signed entry form and payment to Zhao Changjun Wushu Academy

200 West Camden Ave. Moorestown, NJ 08057 USA **Phone (856) 426–8066(English)** **(856)397-0668(Chinese)**
Email: junma103@gmail.com www.zhaochangjun.net