

Signature of Contestant

Date

If under 18, Signature of Parent or Guardian

RELEASE OF CLAIMS RE PERSONAL INJURY AND ASSUMPTION OF RISK  
 I hereby voluntarily submit my application for attendance and participation in the aforementioned 2025 CHUNG KIM'S INTER-SCHOOL TOURNAMENT. With full knowledge of the risk of injury, I do hereby assume full responsibility for any and all damages, injuries and/or losses that I may sustain or incur while attending or participating in the event and expressly waive and release all claims against the promoters, instructors and/or sponsors of said event, individually or otherwise, and release each of them in respect of any injury I may sustain.  
 I further understand that any medical treatment given to me at this event will be of emergency first aid treatment only, and I expressly request and consent to such emergency assistance. I consent that any pictures taken of/or by me in connection with this event can be used for publicity, promotion or television showings, and waive any right to compensation thereof.  
 NOTE: THIS RELEASE CONSENT AND ASSUMPTION OF RISK HAS IMPORTANT LEGAL CONSEQUENCES. IF UNDER 18, THIS DOCUMENT MUST BE EXECUTED BY PARENT OR LEGAL GUARDIAN.

Signature (read below before you sign) \_\_\_\_\_ Date \_\_\_\_\_

In Case of Emergency: Name of Person to Contact \_\_\_\_\_ Tel. ( ) \_\_\_\_\_

School or Club Name \_\_\_\_\_ Address \_\_\_\_\_

Home Address \_\_\_\_\_ Instructor's Name \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Wgt. \_\_\_\_\_ Rank \_\_\_\_\_

NOTE: Fill out the stubs on each event you will be participating in. \$40.00 per contestant for one event, \$45.00 for any two events, \$50.00 for all three events, payment to accompany entry form.

STAMP

BREAKING

NAME \_\_\_\_\_ (Please Print)  
 SCHOOL OR CLUB \_\_\_\_\_  
 RANK \_\_\_\_\_  
 DIVISION \_\_\_\_\_  
 WT \_\_\_\_\_  
 AGE \_\_\_\_\_

NAME \_\_\_\_\_ (Please Print)  
 SCHOOL OR CLUB \_\_\_\_\_  
 RANK \_\_\_\_\_  
 DIVISION \_\_\_\_\_  
 WT \_\_\_\_\_  
 AGE \_\_\_\_\_

STAMP

FORMS

**10% DISCOUNT**  
 YES! I'm Pre-registering by April 19th, 2025.  
 1 Event - ~~\$40.00~~ now \$36.00  
 2 Events - ~~\$45.00~~ now \$40.50  
 3 Events - ~~\$50.00~~ now \$45.00

Entry No. \_\_\_\_\_

**Inter-School Tournament**  
**SATURDAY, April 26th, 2025**



Entry No. \_\_\_\_\_



**SATURDAY, April 26th, 2025**

# Inter-School Tournament

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FORMS

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(Please Print)

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 SCHOOL OR CLUB \_\_\_\_\_  
 RANK \_\_\_\_\_ WT \_\_\_\_\_ AGE \_\_\_\_\_  
 DIVISION \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Wgt. \_\_\_\_\_ Rank \_\_\_\_\_

Home Address \_\_\_\_\_ Instructor's Name \_\_\_\_\_

School or Club Name \_\_\_\_\_ Address \_\_\_\_\_

In Case of Emergency: Name of Person to Contact \_\_\_\_\_ Tel. ( ) \_\_\_\_\_

Date \_\_\_\_\_ Signature (read below before you sign) \_\_\_\_\_

NOTE: Fill out the stubs on the right for each event you will be participating in. \$40.00 per contestant for one event, \$45.00 for any two events, \$50.00 for all three events, payment to accompany entry form.

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(Please Print)

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 SCHOOL OR CLUB \_\_\_\_\_  
 RANK \_\_\_\_\_ WT \_\_\_\_\_ AGE \_\_\_\_\_  
 DIVISION \_\_\_\_\_

STAMP

FIGHTING

## FIGHTING

(Please Print)

NAME \_\_\_\_\_  
 SCHOOL OR CLUB \_\_\_\_\_  
 RANK \_\_\_\_\_ WT \_\_\_\_\_ AGE \_\_\_\_\_  
 DIVISION \_\_\_\_\_

Signature of Contestant

Date

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