

2018 TIGER CLAW KUNGFUMAGAZINE.COM CHAMPIONSHIP ENROLLMENT FORM

Please Print Clearly - One Form per Competitor - Make Copies of this Registration Form

1. COMPETITOR'S INFORMATION:	2. LIST DIV #'S ENTERING:
Last Name: _____ First: _____ M/F: _____ Weight: _____	1 _____
Rank: (Circle) BEG INT ADV E-Mail: _____	2 _____
Birthdate: ____ / ____ / ____ Competition Age (as of 1/1/2018): _____	3 _____
Address: _____ City: _____ ST: ____ Zip: _____	4 _____
Home Ph: (_____) Emergency Ph: (_____)	5 _____
Instructor: _____ Team: _____	6 _____
School: _____ School Ph: (_____)	7 _____
	8 <u>Example: CA010</u>

3. REGISTRATION FEES (Maximum Four Regular Divisions per competitor per day) Pre-registration ONLY - DEADLINE MAY 10th**

REGISTERED BY:	March 30 TH	April 20 TH	May 10 TH	QTY	X	COST	=	TOTAL
REGULAR DIVISIONS								
CMA First Division	\$55	\$60	\$65		X	\$	=	\$
CMA Each Additional	\$20	\$25	\$30		X	\$	=	\$
SPECIAL DIVISIONS								
Year of the Dog – Top Dog Championship	\$55	\$60	\$65		X	\$	=	\$
Ku Yu Cheong Bak Sil Lum Championship	\$55	\$60	\$65		X	\$	=	\$
WildAid Cub/Teen Tiger	\$55	\$60	\$65		X	\$	=	\$
WildAid Tiger Claw	\$55	\$60	\$65		X	\$	=	\$
Each First Timer Division	\$55	\$60	\$65		X	\$	=	\$
Sparring Set per Group (Beg / Int / Adv)	\$55	\$60	\$65		X	\$	=	\$
Team Competition (Internal / External) (Int / Adv)	\$175	\$185	\$195		X	\$	=	\$
								SUB TOTAL \$ _____

SPECTATORS	POSITIVELY NO REFUNDS			-	PLEASE DON'T ASK			
SATURDAY DAYTIME	\$10	\$10	\$10		X	\$	=	\$
	SPECTATORS AT DOOR \$10 (CASH)							TOTAL \$ _____

4. COMPETITORS AND PARENTS, PLEASE READ AND SIGN BELOW

I, hereby waive any and all rights or claims I may have against San Jose Convention Center (South Hall), City of San Jose, CA., Pioneer Interstate Inc., Tiger Claw, KungFuMagazine.com, TC Media Intl. Inc., its staff, vendor's, volunteers or sponsors, and any agents, employees, servants, spokespersons, or representatives of such above mentioned entities ("TCEC Group"). And I hereby release and discharge them from any and all claims resulting from injuries, including death, damages or loss which may accrue to me or my heirs arising out of or in any way connected with my attendance and/or participation at TIGER CLAW ELITE CHAMPIONSHIP 2018. I represent and warrant that I am physically and mentally fit, able to participate, and I do hereby assume responsibility for my own well-being, understanding that participation involves bodily contact. I guarantee that I can provide proof of Health Insurance Coverage for myself, which may be requested at any time. I have read, understand and agree to abide by the TCEC rules associated with TCEC events and assume all responsibility and any liability for infringement of such rules and agree to accept the tournament arbitrator's decisions as final. I consent to allow any reproductions of me or likeness created in any manner whatsoever, photographed, filmed or videotaped in connection with the TIGER CLAW ELITE CHAMPIONSHIP 2018 which can be used for instruction, publicity, promotion or television broadcast and I waive any and all compensation in regards thereto. I agree that I have obtained permission from the artists of any music I use in conjunction with my competition and verify by signing this permission that in doing such, I will indemnify, defend and hold harmless all the above named parties from any liability for use of such music and that this artist's permission permits the above names parties to use such music in recorded performances of myself for instructional purposes, publicity, promotion, video and/or televised broadcast and I waive any and all compensation for such.

X **STAFF / OFFICIALS MUST ALSO SIGN THIS WAIVER** _____ DATE: _____ / _____ / 2018
 Competitor or Parent/Guardian Signature Assuming Responsibility if under 18

2018 TCKFMC Checklist - Did you:

Fill in the correct division #'s @ BOX 2. Double check! TCKFMC is NOT responsible for divisional entry errors. Absolutely NO AT DOOR Division Switching

Sign the release on the Enrollment form

Make M.O. / Checks for correct amount payable to: **TIGER CLAW**

Mail THIS FORM & PAYMENT to: **Tiger Claw**
40740 Encyclopedia Circle
Fremont, CA 94538

Questions? Call 510-656-5100 x141 (Gigi) / 510-656-5100 x137 (Gene)
 Please DO NOT Staple Payment Together, Use Paper Clip - THANK YOU
 ☺ **POSITIVELY NO REFUNDS - PLEASE DON'T ASK** ☺

Credit Card Information: Address: _____ Apt: _____ Credit Card # _____
 First Name: _____ City: _____ Expiration Date: _____ CVV# _____
 Last Name: _____ State: _____ Zip: _____ Visa Mastercard American Express Discover
 Tel: (_____) Country: _____ Signature _____

To be filled by TCKFMC Staff ONLY.

RCVD: _____ / _____ AMT: \$ _____ #: _____ Processed by: _____ Order # _____

****Pre-registration ONLY - Deadline May 10th, 2018 - The number of competitors will be capped, so registration may close early!**