



GATEWAY MOO DO KWAN

TAEKWONDO CHAMPIONSHIP

At 9:00 am Come and see
MSTO Team trials.
These athletes are the best
Missouri competitors fighting
for a spot on the MSTO state
team.

Great competition
Matted Rings
Electronic Score Boards



Where: Clayton High School

Clayton, MO. 63105

Date: Saturday, May 9th

Times: Check in 10:00 am

Competition 11:00 am

Fee: \$45 includes Form and Sparring

(MSTO members \$40)

Spectators: \$5 each

Rules: WTF Modified

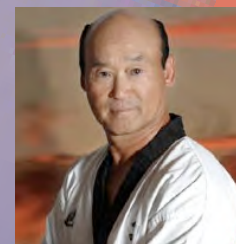
Schedule of Event

9:00-11:00 MSTO State Team Trials

11:00-12:30 All belts aged 5-11

12:30-1:30 All color belts aged 12-Up

1:30-all black belts



Grand Master Shin

There will be no registration at door!

Preregistration postmark by May 4

online registration at:

www.gatewaymoodokwan.org

For more information
Call 314-604-7623

Tournament Director-WooSop Moore

Athlete Registration

5-9-09

Last Name			
First Name			
Address			
	City	State	Zip
Email Address			
Home phone			
TKD School Name			
Instructor's Name			

There will be no registration at door!

Preregistration post mark by May 4

Liability Waiver

I hereby submit my application for registration in the MDK Tournament. In consideration of your acceptance of my entry, I intend to be legally bound for myself, my heirs, executors and administrators waive, release forever, discharge any and all claims for damages, which I may have or here after, accrue against MDK, or their respective officers, agents, representatives, successors, and/or assigns for any and all damages which may be sustained and suffered by me in connection with my association with or entry in the above athletic meet, or which arise out of my traveling to, participating in and returning from such athletic meet. This release is being made for the event being held on 5-9-2009. I agree to waive claims against any person connected with the Tournament for injuries I may sustain and likewise assume full responsibility for all my actions in connection with the Tournament. I understand that any pictures of my participation in the Tournament may be used for publicity without compensation. I have read this release and assumption of liability and understand all its terms. I execute it voluntarily and with full knowledge of its significance. The tournament director reserves the right to refuse any and all applications:-----

Competitor Signature _____

Legal Guardian's Signature _____

Date: _____

Please send all application with check payable to Master Shin to:
MDK 609 west third street, Washington, MO, 63090

MDK 5-9-09

Name	
Age	
Gender	
Weight	
Rank	
Competition	Form_____ Sparring_____