

2015
Spring Hill Challenge
AAU Licensed
January 31st 2015



COMPETITION VENUE: Powell Middle School
4100 Barclay Ave.
Brooksville, FL 34609
Phone: (352)232-8185

For information please call Tina (352)684-7933 or Mr. "C" (352)232-8185

Email: carlosdragon968@aol.com

HOTEL: Holiday Inn Express
14112 Cortez Blvd.
Brooksville, FL 34613
Phone: (352)597-4540

ATHLETE ARRIVAL: Pre-registration is preferred. If you are registering at the door you should all ready have your AAU membership card printed out and plan to arrive no later than 9:00a.m.to ensure proper check-in.

COMPETITION:

Team Forms / Individual Forms / Point sparring / Olympic sparring/ Special Needs

ENTRY FEES: In our 12th year of running this event we have not increased our entry fee.

PLEASE Pre-register. On-site registration fee will be \$59.00.

Novice Division Only

One Event.....\$35.00
Two Events.....\$49.00

Intermediate, Advanced and Black Belt Divisions

One or Two Events.....\$49.00
Black Belt Team Forms Team Fee.....\$40.00 per Team

Spectators

Adult (18+).....\$6.00
Children (5-17yrs).....\$4.00
Children 4 & Under.....FREE

REGISTRATION ENTRY DEADLINE: By Mail post marked Jan. 24th 2015

You must be a 2014-2015A.A.U. member. Coaches must take the on-line coaches clinic prior to event.

Register at www.aautaekwondo.org Membership will **NOT** be done at the door.

PAYMENT INFO:

Money Order, Cashiers check, Cash, Checks – Only. Payable to: Carlos Carrasquillo

- This event is Licensed by the Amateur Athletic Union of the U.S., Inc.
- All participants must have a current AAU membership.
- AAU membership may not be included as part of the entry fee to the event.
- AAU membership must be obtained before the competition begins except where the event operator has a laptop available with an internet connection.
- **BE PREPARED:** Adult and Non-Athlete memberships are no longer instant and cannot be applied for at the event. Please allow up to 10 days for membership to be processed.
- Participants are encouraged to visit the AAU web site www.aausports.org to obtain their membership.

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INDIVIDUAL COMPETITORS APPLICATION FORM

(Please Print Clearly or Type)

Last Name _____ First Name _____ M.I. _____

Address _____ City _____ State _____ Zip _____

E-Mail Address: _____ Phone # (_____) _____

Date of Birth ____/____/____ Competition Age (as of 12/31/2014) _____

Check Competitions you wish to participate in: _____ Forms _____ Point Sparring **OR** _____ Olympic Sparring

Competition Weight _____ lbs. (Please be accurate) Sex: _____ Male _____ Female

Competition Rank _____ Novice _____ Intermediate _____ Advanced _____ Black (_____) Dan)

(White, Yellow, Orange) (Green, Purple, Blue) (Red, Brown)

AAU Association: Florida or Other: _____ AAU # (required) _____

Pending is not accepted

Tae Kwon Do School Affiliation:

Head Instructor _____ AAU Club Code _____

NOT REQUIRED

School Name _____

School Address _____

E-Mail Address _____ Phone # (_____) _____

Competition Fee: *Novice - -One Event \$35 or *Two Events \$49

***All Other Ranks - One or Two Events \$49**

Make payable to: Carlos Carrasquillo Money Order, Cashiers check, or Cash.

There will be NO REFUNDS issued.

Mail To: Dragon's Dojo Inc 3071 Commercial Way, Spring Hill, FL 34606

In consideration for the acceptance of this application which is voluntarily submitted by me, I intend to be legally bound hereby for myself, executors, and administrators and do waive and release any and all rights and claims for physical, mental, and emotional damages or death which I might have against the AAU, Florida AAU, Carlos Carrasquillo, Dragon's Dojo Inc., Powell Middle School, Hernando County School Board, City of Brooksville and any others connected with this event for any and all injuries suffered, damages, actions, or causes, or causes of actions, whatsoever, to my person or property.

I also state that I will abide by all the rules and regulations as set forth by the tournament director and acknowledge that my failure to do so may result in my immediate expulsion without refund or any money paid.

Competitors Signature (or Parent/Legal Guardian if Competitor is under 18 years of Age) _____

Date _____