## 2019 Spring Hill Challenge AAU Licensed

January 12th 2019



COMPETITION VENUE: Powell Middle School

4100 Barclay Ave. Brooksville, FL 34609 Phone: (352)232-1979

For information please call Mr. "C" (352)232-1979

Email: dragonsdojoinc@gmail.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 already 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/ Padded Weapons/ Board Breaking/ Special Needs ENTRY FEES:

PLEASE Pre-register. On-site registration fee will be \$70.00.

## Novice Division Only

One Event......\$45.00 Two Events.....\$60.00

Intermediate, Advanced and Black Belt Divisions

Black Belt Team Forms Team Fee.....\$45.00 per Team

Special Needs......\$25.00
Board Breaking Competition.....\$10.00
Padded Weapons.....\$10.00

Spectators

REGISTRATION ENTRY DEADLINE: By Mail post marked Jan. 9th 2019

You must be a 2018-2019A.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, Cashier's 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.

## Spring Hill Challenge

January 12th 2019

## INDIVIDUAL COMPETITORS APPLICATION FORM

(Please Print Clearly or Type)

Last Name	First Nar	me	M.I	
Address	City		StateZip	
E-Mail Address:		Phone	# ()	_
Date of Birth//	Competition Age	(as of 12/31/201	9)	
Check Competitions you wish to partic SparringPadded WeaponsB	-		sPoint Sparring OR _	Olympic
Competition Weightlbs. (	Please be accurate)	Sex:	MaleFemale	
Competition RankNovice				
(White, Yellow, Orange)				
AAU Association: Florida or Other: _		AAU # (requ	ired)	
			Pending is not accepted	
Tae Kwon Do School Affiliation:				
Head Instructor	AAU	Club Code		
School Name			NOT REQUIRED	
School Address				
E-Mail Address		Phone # (	)	_

Competit ion Fee: \*Novice - -One Event \$45 or \*Two Events \$60

\*All Other Ranks - One or Two Events \$60

Padded Weapons \$10 Board Breaking \$10 \*Special Needs \$25

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

There will be NO REFUNDS issued.

Mail To: Dragon's Dojo Inc 4250 Orchid Dr. Hernando Beach, FL 34607

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