

SEREFF TAEKWON DO, INC.

Grand Master Sereff's Fall Championship 2009

*This competition is sanctioned by the USTF and its rules
And regulations. Grand Master Sereff welcomes USTF
Affiliated schools and their students to compete for top
Honors in over 45 divisions.*

*The Fall Championship will include Individual sparring,
Pattern, plus 3 person Black Belt Team (1 woman 2 men)
Competition. Registration forms may be obtained from all
USTF schools or at ustf-uf.com*

*The fighting will be light controlled contact with safety
pads including head gear for Junior students 15 & under.
All coaches and referees will need their Certification cards
and proper dress to be on the gym floor. (Blue slacks,
white shirt, Blue tie and WHITE tennis shoes.) Please see
your instructor For information or call Sereff Taekwon Do
at (303)466-4963.*

Black Belt Teams pre-register only by

October 9, 2009



**BROOMFIELD HIGH SCHOOL
1000 DAPHNE (CORNER OF 10TH & MAIN ST.
BROOMFIELD COLORADO 80020**

<i>Sunday</i>	<i>October 18, 2009</i>
<i>Time</i>	<i>9:00am to 4:30pm</i>
<i>Registration</i>	<i>8:30am Juniors</i>
	<i>11:00am Adult Color Belt</i>
<i>Admission</i>	<i>\$4.00 General Admission</i>
	<i>\$3.50 USTF Members</i>
	<i>Kids under 10 Free</i>

SEREFF TAEKWON DO, INC.

United States Taekwon Do Federation
6801 W. 117th Ave. E-5
Broomfield, CO 80020

Phone: 303-466-4963
Fax: 303-466-3587
Email: rsereff@rmi.net

*Registration and Tickets will be available at the door.
Black Belt Teams are pre-register only.
No one will be allowed to enter the gym floor until 8:30
To allow for set-up! We thank you for your cooperation.*

*Absolutely no Food or Drink in the gym,
except bottled water please!*

GRAND MASTER SEREFF'S FALL CHAMPIONSHIP 2009
BLACK BELT TEAM REGISTRATION
2 Men and 1 Woman

ADULT BREAKS

Side kick
Turning Kick
Knife hand

DESIGNATED PATTERN

Kwan- Gae

OPTIONAL PATTERN

Highest pattern for the lowest rank on team

Fee: \$60.00 per Team Pre-register Only by October 9, 2009

LIABILITY & PHOTOGRAPH RELEASE

OCTOBER 18, 2008

In consideration of your acceptance of my participation in this event, I hereby, for myself, indemnify, release, forever discharge and agree to hold harmless Grand Master Charles E. Sereff, Master Renee' J. Sereff, Sereff Taekwon Do, Inc., Unites States Taekwon Do Federation, Inc. and the officers, employees and agents thereof, Boulder Valley Community School Program, from any and all liability, claims or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever, including reasonable attorney's fees, which may be incurred by the undersigned while participating in this event.

I clearly understand that the sport and art of Taekwon Do involves bodily contact. I am aware of my medical condition and hereby certify that my participation is voluntary and that I am mentally and physically fit to participate in said event.

I hereby consent to and authorize the taking of photographs or videotape in which I may appear. I hereby waive for myself all rights of privacy in and to any said photographs or tapes, including without limitation, and any and all claims for libel and or invasion of privacy. I hereby grant for myself to Sereff Taekwon Do, Inc., the irrevocable right and permission in respect to the photographs or videotape that it has taken or has had taken of me to use, re-use, publish, re-publish, modify and display the same, in whole or part, individually or in conjunction with other photographs and in conjunction with any other copyrighted matter, in any and all media now or hereafter known, for illustration, promotion, art, advertising and trade, or any other purpose whatsoever, and to use my name in connection therewith if it so chooses.

PRINT PLEASE

<i>Name</i> _____	<i>Date</i> _____	<i>Signature</i> _____
<i>Name</i> _____	<i>Date</i> _____	<i>Signature</i> _____
<i>Name</i> _____	<i>Date</i> _____	<i>Signature</i> _____

WE NEED TEAM MEMBERS TO WORK IN THE MORNING, THANK YOU!

Name _____ USTF School _____ Rank _____ Age _____ Sex _____ Wt. _____

Address _____ City _____ State _____ Zip _____ Phone _____

FIGHTING \$25.00 _____
PATTERNS \$25.00 _____
Les pre-registration discount (by October 12, 2009) _____
\$2.00 one event, \$5.00 both _____
Less family discount \$5.00 (one per family) _____
TOTAL FEE ENCLOSED _____

Mail this form to Sereff Taekwon Do, 6801 W. 117th Ave., Broomfield, CO. 80020

LIABILITY & PHOTOGRAPH RELEASE
OCTOBER 18, 2009

In consideration of your acceptance of my and/or my child's participation in this event, I hereby, for myself, and for and on behalf of my child, indemnify, release, forever discharge and agree to hold harmless Grand Master Charles E. Sereff, Master Renee' Sereff, Sereff Taekwon Do, Inc. United States Taekwon Do Federation, Inc., Boulder Valley Community School Program and the officers employees and agents thereof, from any and all liability, claims or demands for personal injury, sickness, or death, as well as property damage and expenses of any nature whatsoever, including reasonable attorney's fees, which may be incurred by the undersigned and/or the child-participant while participating in this event.

I clearly understand that the sport and art of Taekwon Do involves bodily contact. I am aware of my, and my child's personal medical condition and hereby certify that my and/or child's participation is voluntary and that I, and/or my child, am mentally and physically fit to participate in said event.

I hereby consent to and authorize the taking of photographs or videotape in which I, and/or my child may appear. I hereby waive for myself, and for and on behalf of my child all rights of privacy in and to any said photographs or tapes, including without limitation, and any all claims for libel and/or invasion of privacy. I hereby grant for myself, and for and on behalf of my child to Sereff Taekwon Do, Inc. the irrevocable right and permission in respect to the photographs or videotape that it has taken or has had taken of me to use, re-use, publish, re-publish, modify and display the same, in whole or part, individually or in conjunction with other photographs and in conjunction with any other copyrighted matter, in any and all media now or hereafter known, for illustration, promotion, art, advertising and trade, or any other purpose whatsoever, and to use my name in connection therewith if it so chooses.

Signature _____ Date _____
Parents Signature _____ Date _____

My health insurance is through _____ and current.