

2019 NASTA OPEN

National Championships

June 13th-15th

Lil' Dragon/Tiny Tigers
Competition
For 3-6 years



GRAND CHAMPION
TROPHY'S for
Traditional FORMS

Hirsch Memorial Coliseum

3701 Hudson Ave.

Shreveport, Louisiana 71109

EVENTS:

Olympic Sparring, Point Sparring

Forms, Open Forms, Team Forms, Breaking

Sword Fighting, Bo Staff Fighting, Weapons, Grappling

For more information:

www.nasta.us / Bob Crouch 262-391-1165 / ninjabc62@yahoo.com

You can register online at www.tourneyreg.net

2019 NASTA Open Championships

REGISTRATION AND WEIGH-INS

Hirsch Memorial Coliseum

3701 Hudson Ave., Shreveport, Louisiana

Thursday June 13th from 7:00 p.m.-9:00 p.m.

Registration and Black Belt Testing for NASTA and Kukkiwon

If you are wanting to test at nationals contact GM Steve Wiedenmann

If you can't make the Thursday night Registration & Weigh-Ins:

Friday - Saturday 8:00 a.m.- 9:00 a.m.

EVENT SCHEDULE:

Competition begins each day at 9:00 A.M.

Friday	6/14/2019	Forms, Open Forms, Team Forms Weapons, Olympic Sparring
Saturday	6/15/2019	Lil' Dragons/Tiny Tigers/Lil' Ninjas Point Sparring, Sword Fighting, Breaking, Grappling

HOTEL INFORMATION

We are using a new concierge service this year that provides hotel booking, Airline Booking and Transportation Booking

<http://www.sporttournamentconcierge.com/nasta.html>

COMPETITOR APPLICATION

2019 NASTA Open National Championships

June 13th-15th, 2019

Hirsch Memorial Coliseum, 3701 Hudson Ave., Shreveport, Louisiana

Registration and Payment received by: May 1st \$50 for one event / \$5.00 each additional event
June 1st \$60 for one event / \$10.00 each additional event
After June 13th \$70 for one event / \$15.00 each additional event

Make checks payable to:

Bob Crouch
P.O. Box 83
Dousman, WI 53118

Paying with a Credit Card?

Credit Card Number: _____

MM/YY: _____ CVV: _____ ZIP: _____

*Or register online at www.tourneyreg.net

ATHLETE INFORMATION:

FIRST NAME: _____ LAST NAME: _____

ADDRESS, CITY, STATE, ZIP: _____

Phone: _____ E-MAIL: _____

DATE OF BIRTH: _____ AGE: _____ (as of 12/31/2019) RANK: _____ WEIGHT: _____ GENDER: _____

TAEKWONDO SCHOOL: _____

ADDRESS, CITY, STATE, ZIP: _____

WEBSITE: _____ E-MAIL: _____

INSTRUCTOR: _____

PLEASE CHECK YOUR EVENT(S): See Registration & Payment Fees above. Total Due \$ _____

OLYMPIC SPARRING: _____ POINT SPARRING: _____ SWORD FIGHTING: _____

FORMS: _____ OPEN FORMS: _____ WEAPONS: _____

TEAM FORMS: _____ GRAPPLING: _____ BREAKING: _____

(Must pre-register/3 members only)

(Boards must be purchased at venue)

SPECTATOR FEES:

ADULTS: 1 Day \$ 8.00 2 Days \$12.00 **KIDS-Under 10:** 1 Day \$5.00 2 Days \$9.00 **Kids Under 4 - FREE**

PLEASE COMPLETE & SIGN THE RELEASE PAGE ON THE BACK OF THIS PAGE!

2019 NASTA National Championships

ATHLETE WAIVER/RELEASE FORM

("Agreement")

IN CONSIDERATION of being permitted to participate in any way in any NASTA, Inc. activity ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin.

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. FULLY UNDERSTAND that: (a) ATHLETIC ACTIVITIES INVOLVE RISK AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COST, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.
3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the North American Sport Taekwondo Association, Inc. (NASTA, Inc.), including its representatives, the related affiliated and subsidiary companies, as well as the officers, directors, agents, employees and assigns of each, and the NASTA Districts, clubs, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other indemnified and held harmless by the NASTA, Inc., each considered one of the "RELEASES" herein FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES, AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OR RISK, AND HARMLESS EACH OF THE RELEASES from any litigation expenses, attorney fees, loss, liability, damages, or cost which any way incur as a result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT

PRINT NAME OF PARTICIPANT: _____

PARTICIPANT'S SIGNATURE (only if age 18 or over): _____ DATE: _____

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASE'S OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST OF ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/LEGAL GUARDIAN: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ DATE: _____

Parent/Legal Guardian Signature (only of participant is under the age of 18): _____

2019 NASTA National Championships

OFFICIALS & COACHES PASS APPLICATION

PLEASE PRINT CLEARLY

LAST NAME: _____ FIRST NAME: _____ M.I. _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

DATE OF BIRTH ___/___/___ AGE: _____

CURRENT RANK: BELT COLOR: _____ DAN: _____

NASTA STATE NAME: _____

(State)

CERTIFICATION CLASS if any (circle one) AA A B C D E

Taekwondo School Affiliation:

Chief Instructor _____ School Name _____

School Address: _____ Phone: _____

I WILL: OFFICIATE _____ COACH _____ (Coaches Pass - \$20)

Any Coach bringing 10 athletes or more will receive FREE Coaches Pass.

Coaches Shirts available: SM MED LG XL XXL XXXL OTHER _____ Cost \$20.00

(Circle desired size)

Please preorder your shirts as there is no guarantee that we will have all sizes available at the event.

Make Checks payable to: **Bob Crouch** - P.O. Box 83, Dousman, WI 53118

I understand I must be properly attired according to NASTA rules:

Coaches - NASTA Coaches Shirt, Dobok or Warm-Up Pants & Sneakers

Officials - Black Blazer, (or Black NASTA Official's Polo Shirt) White Shirt, Black Pants, Black Tie, Dark Socks, White or Black Sneakers.

Signature _____ Date _____

TEAM FORMS APPLICATION

2019 NASTA OPEN National Championships

June 14th - 15th, 2019

Hirsch Memorial Coliseum, Shreveport, LA

ENTRY FEES:

TEAM FORMS FEE

***See Registration Form**

TEAM FORMS INFORMATION:

TEAM NAME: _____

Athlete #1 _____ D.O. B. ____/____/____

Athlete #2 _____ D.O.B. ____/____/____

Athlete #3 _____ D.O.B. ____/____/____

CONTACT PHONE: _____ E-MAIL: _____

TAEKWONDO SCHOOL: _____

ADDRESS, CITY, STATE, ZIP _____

INSTRUCTOR: _____

AGE: 5-17 _____

18+ _____

GENDER: Male _____

FEMALE _____

MIXED _____

Highest Rank on team White _____ Yellow _____ Orange _____ Green _____ Blue _____

Red _____ 1st Dan _____ 2nd Dan _____ 3rd Dan _____

4th Dan _____ 5th Dan _____