

Battle of Detroit 2009
All Competitors must register by
January 1, 2009

There will be no registration on the day of the tournament

Reg. # _____
(Please Print This Information Legibly)

Competitor Information

Name _____ Age _____ Sex _____

Address _____

City _____ State _____ Zip _____

Telephone (____) - _____ E-mail _____

Rank _____ Style _____

Martial Arts School Information

School Name _____ Instructor(s) Name _____ Rank _____

School Address _____

City _____ State _____ Zip _____

Telephone (____) - _____ Fax (____) - _____

E-mail _____ Web Page _____

EVENTS (circle all that apply)

Choose only one from this category

Open Form Traditional Form Tae Kwon Do Form
Tang Soo Do Form Chinese Form

Choose only one from this category

Sparring Continuous (USA Tae Kwon Do Rules)
Sparring Point (Modified NASKA Rules)

Choose only one from this category

Musical Form

Choose only one from this category

Weapons Open Weapons Traditional

Choose only one from this category

Weapons Musical

Choose only one from this category

Extreme Forms (with or without music)

Choose only one from this category

Open Breaking (wood or brick) Speed Brick Breaking *

Choose only one from this category

Self Defense - one step

Choose only one from this category

Team Form Child 10 & Under Team Form Child 11-15
Team Form Adult

Choose only one from this category

Team Form (2 to 5 persons-each person must register and pay for the entry)

For this division must be a member of WSBBBA and follow regulations. Membership available at Championship or go to www.wsbba.com

Event Fees

1 Event - \$50 2 Events - \$60 3 Events - \$70 4 Events - \$80
5 Events - \$90 6 Events - \$95 7 Events - \$100 8 Events - \$105

Spectator Admission to Championship March 28, 2009

QTY _____ adults (\$6)

QTY _____ 12 and under (\$4)

Mail to and make checks payable and send with this registration form to:

**“World Martial Arts College”
PO Box 489
Linden, Michigan 48451**

Waiver Clause/Hold Harmless Agreement

I, the undersigned, do hereby voluntarily submit my application for registration in the said Battle of Detroit Martial Arts Championships. I agree to waive any claim against any persons or organizations connected with the World Health Fitness Expo & Battle of Detroit Martial Arts Championships for any injuries I may sustain. I likewise assume full responsibility for all my actions in connection with the said championships. I further agree that the tournament director for publishing or promotion can use any pictures taken of me in connection with the said championships without compensation at this or any other time hereafter.

If Competitor Is Under 18 Years Old The Parent/Guardian Must Sign This Entry Form.

Signature: _____