

# TAEKWONDO PLAYERS CUP

**Saturday, September 8<sup>th</sup>, 2007**

THIS YEAR'S PLAYERS CUP PROMISES TO BE VERY COMPETITIVE  
JOIN US AND BE A PART OF SPORTS TAEKWONDO AT ITS BEST!!

Sparring will start at 8:30AM

This is a double elimination even for sparring. Pre-registration is requested in order for brackets to be set and posted prior to the start time the day of tournament.

**Head contact:** Adult color belts and Juniors under 12 years old NO head contact.  
Controlled head contact only for other divisions.

**Mail your entry form by September 1<sup>st</sup>, 2007 to**

TAEKWONDO2XCELL, 2519 Boyer Avenue East, Seattle, WA 98102

**Entry fee:** \$50 for individual sparring / \$90 for team sparring

**Personal Checks  
NOT  
Accepted**

**Team Sparring for:**

- Junior Black Belts and Red Belts, (12-13), (14-15), (16-17)
- Black Belt Divisions and Red Belt Divisions

Team Competition (2 Players per Team) is 2-round, 2-minute matches between teams. The Winner shall be the team that wins 2 rounds.

In case of a tie, one final round will be added. Team sparring fee of \$90 will allow players to compete in individual sparring also.

**DOUBLE ELIMINATION SPARRING!!  
EXCITING TEAM MATCHES!!**

**Competition Site:**

MEYDENBAUER CENTER

11100 NE 6<sup>th</sup> Street, Bellevue, WA  
(425) 637-1020

**From I-5 North:** Exit onto Hwy 405 N, take  
left on 8<sup>th</sup>, left on 112<sup>th</sup>, rig

**From I-5 South:** Exit on to Hwy 405 S, take  
right onto 8<sup>th</sup>, left to 112<sup>th</sup>,

**FOR MORE INFORMATION, CONTA**

Phone: (206) 755-9380 Email: ]

Website for entry forms: TKD2XCEL

**This event is for the fun of the  
development as a national tea**



# TAEKWONDO PLAYERS CUP OFFICAL ENTRY FORM

SATURDAY, SEPTEMBER 8, 2007 \* MEYDENBAUER CENTER (Bellevue, WA)

PRE-REGISTRATION  
 MUST BE POSTMARKED BY SEPTEMBER 1, 2007  
 Send to: Taekwondo2xcell, 2519 Boyer Ave. E, Seattle, WA 98102

ENTRY FEE: \$50 individual or  
 \$90 team (paying for Team Sparring automatically enters you into individual)  
**Money Order or Cashier's Check ONLY**

## INDIVIDUAL SPARRING

\*All sparring by modified USTU rules

Male  Female  Name: \_\_\_\_\_ School/Dojang: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ **Please circle and place yourself in the correct division below**

Belt Color	White	Yellow	Green	Blue	Red	Black
Age						
Weight						

**Juniors only (12-13), (14-15), (16-17) Red Belt Division**

## TEAM SPARRING: **Juniors only (12-13), (14-15), (16-17) Black Belt Division**

Male  Female  Team Name: \_\_\_\_\_

	Member 1	Member 2
Name (print):		
Contact Phone Number:		
If you wish to participate in individual sparring also, please fill-out the information above (individual sparring).		
Age & Weight:	_____ yrs.old _____ lbs.	_____ yrs.old _____ lbs.

## LIABILITY WAIVER

I, the undersigned, do hereby voluntarily participate in the 2007 Taekwondo Players Cup. I am not entering this competition in reliance on any written or oral representations by Taekwondo2xcell regarding the rules and qualifications of the officials, judges, and referees. In consideration for my acceptance of entry, I do hereby, for myself, my heirs, executors, and administrators waive, release and forever discharge any and all rights and claims for damages which I may have or may accrue to me against Taekwondo2xcell and it's Organizing Committee, the Meydenbauer Center, and all members of the tournament, or their respective officers, representatives, successors, and/or assigns and against any competitor for any and all damages which may be sustained by me in connection with my association with or entry in the above Taekwondo event, or which arise out of traveling to, participating in, and returning from this event. I understand that Taekwondo is a body contact sport that is dangerous and can result in injury, and further understand all the competition 2007 rules and general information published by the sponsors and I agree with them in their entirety. **I HAVE READ AND FULLY UNDERSTAND AND AGREE TO ALL THE TERMS AND CONDITIONS OF THE ABOVE WAIVER.**

\_\_\_\_\_  
 PRINTED NAME

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 DATE

\_\_\_\_\_  
 SIGNATURE OF PARENT OR GUARDIAN (if competitor under 18)

\_\_\_\_\_  
 DATE

# TAEKWONDO PLAYERS CUP

SEPTEMBER 8, 2007

## COACHES APPLICATION

NAME: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Have you ever attended a Taekwondo referee or coaching seminar? Yes \_\_\_\_ No \_\_\_\_

Are you a registered coach or referee with the USA Taekwondo? Yes \_\_\_\_ No \_\_\_\_

**ALL COACHES AND REFEREES ARE REQUIRED TO ATTEND THE 8:00 A.M. MEETING. I WILL REVIEW THE COMPETITION RULES FOR THE PLAYERS CUP.**

**\$10.00 COACHING FEE IS ATTACHED. Yes \_\_\_\_ No \_\_\_\_**