



2008 WA State Selections Taekwondo Championship
Saturday 7th June
Kwinana Recreation & Leisure Centre, (Kwinana Recquatic),
Corner Gilmore Avenue & Chisham Avenue, Kwinana WA

Name: Surname:
 Address:
 Suburb:..... Post Code:
 Phone: Mobile:
 Email :
 Date of Birth: Age at 31-12-2008:
 Belt Level:Gup orPoom / Dan
 Male Female Total Paid:
 Name of Club:Branch Location:
 Head Instructor (HI): HI Signature:

Clearly mark your entry categories with an **X** in the box provided.

<input type="checkbox"/> Individual Taegeuk Poomsae				
<input type="checkbox"/> under 8	<input type="checkbox"/> 8-9	<input type="checkbox"/> 10-11	<input type="checkbox"/> 12-13	<input type="checkbox"/> 14-17
<input type="checkbox"/> 18-30	<input type="checkbox"/> 31-40	<input type="checkbox"/> 41-50	<input type="checkbox"/> 51+	
Belt Level	1st Compulsory	2nd Option (delete one)		
<input type="checkbox"/> Yellow	iL Jang (1)	E Jang (2) or iL Jang (1)		
<input type="checkbox"/> Blue	Sam Jang (3)	Sa Jang (4) or E Jang (2)		
<input type="checkbox"/> Red	Yuk Jang (6)	Chil Jang (7) or O Jang (5)		
<input type="checkbox"/> 1 st Poom-Dan	Koryo	Geumgang or Pal Jang (8)		
<input type="checkbox"/> 2 nd Poom-Dan	Geumgang	Taebaek or Koryo		
<input type="checkbox"/> 3 rd Poom-Dan	Taebaek	Pyongwon or Geumgang		
<input type="checkbox"/> 4 th Poom-Dan	Pyongwon	Shipjin or Taebaek		
<input type="checkbox"/> 5 th Dan	Shipjin	Jitae or Pyongwon		
<input type="checkbox"/> 6 th Dan	Jitae	Chonkwon or Shipjin		
<input type="checkbox"/> 7 th Dan	Chonkwon	Hansu or Jitae		



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Creative Individual Poomsae

Creative Poomsae rules:

1. The total number of movements shall be limited to 60, with a minimum of 50.
2. The Maximum steps shall be limited to 40, with a minimum of 30
3. All patterns and movements of the Creative Poomsae shall be 75% standard Taekwondo techniques.
4. All contestants must wear the minimum of white dobok pants.
5. All contestants must provide their own music and music equipment.
6. Maximum time duration is 1 and a half minutes. Music must finish at the completion of the routine.
7. No weapons are allowed.

<input type="checkbox"/> Creative Individual Poomsae		<input type="checkbox"/> Creative Individual Poomsae to music		
Age Division	<input type="checkbox"/> Under 8	<input type="checkbox"/> 8-9	<input type="checkbox"/> 10-11	<input type="checkbox"/> 12-13
	<input type="checkbox"/> 14-17	<input type="checkbox"/> 18-35	<input type="checkbox"/> 36+	
Belt Division	<input type="checkbox"/> Blue	<input type="checkbox"/> Red	<input type="checkbox"/> Black	



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Teams and Pairs

Please specify details of team (3 members), family (2 or 3 members) and pairs (2 members) for each event. Each participant must fill the application form and declaration and staple together. Team, Family and Pairs perform only one poomsae of their choice. Team creative poomsae must follow the same creative poomsae rules as for the individual creative poomsae rules.

<input type="checkbox"/> Team Poomsae (mixed gender)	<input type="checkbox"/> Family Poomsae (mixed gender)	<input type="checkbox"/> Team Creative Poomsae (mixed gender)	<input type="checkbox"/> Team Creative Poomsae to music (mixed gender)	<input type="checkbox"/> Pairs Poomsae (same gender & mixed gender)
Age Division	<input type="checkbox"/> under 8 <input type="checkbox"/> 18-35	<input type="checkbox"/> 8-10 <input type="checkbox"/> 36+	<input type="checkbox"/> 11-13 <input type="checkbox"/> family – any age group	<input type="checkbox"/> 14-17
Belt Division	<input type="checkbox"/> Yellow	<input type="checkbox"/> Blue	<input type="checkbox"/> Red	<input type="checkbox"/> Black
Team Name:	Family Name:	Team Name:	Team Name:	Team Name:
Team Captain:	Family Captain:	Team Captain:	Team Captain:	Team Captain:
Team members	Family members	Team members	Team members	Team members:

Note: The WA Technical Committee may merge divisions to enable competition if there is only one contestant entered for the any of the individual, team or pairs divisions.

Fees enclosed: \$30 -1st event; \$15 -2nd event; \$15 - 3rd event;
 \$15 -4th event; \$15 -5th event; less \$10 if entered in sparring

Make cheque out to: Taekwondo WA

DECLARATION

I, the applicant, or parent or legal guardian of the applicant, hereby acknowledge and declare for myself, my heirs, executors and legal representatives that, in relation to

(APPLICANT FULL NAME):

1. I have been advised by the association and understand the risks of Hepatitis B and HIV infection and undertake that the above player/s will provide and use their own personal drink container and towel, each marked with their name.
2. I have the following condition / allergy which could affect medical assessment or treatment
(Specify which player the condition relates to)

3. The above player/s has/have not knowingly used any drugs or substances for the purpose of enhancing performance and I acknowledge that they may be tested at any time by the Australian Sports Drugs Agency (prohibited substances include anabolic steroids, beta-blockers, stimulants, such as caffeine, narcotics/analgesics, such as codeine, pseudo ephedrine found in medicine for colds and flu, and diuretics) – refer DRUGS HOTLINE: 1800 020 506.
I GIVE PERMISSION FOR DRUG TESTING TO BE UNDERTAKEN BY ASDA in relation to the above player/s in terms of recognized testing standards, should the above player/s be selected for testing.
4. In the event of any illness and/or accident, I hereby authorize and direct the association and/or its authorized representatives to seek and obtain all necessary medical and/or surgical treatment as may be required and I accept the responsibility for payment and/or reimbursement of all medical expenses incurred on my behalf by the association.
5. I undertake that I/the above player/s will observe all regulation and by-laws of the association and shall comply with all reasonable directions and decisions of its officials and instructors.
6. I hereby acknowledge that a condition of entry to the event is that I will indemnify and keep indemnified the association, its committees, trustees, servants, agents, instructors or members against any liability arising from my participation in the event or from any pre-event training and preparation or other activity related to the event and from travel to and from the event or activities.
7. I understand that the above player/s cannot compete if they have been concussed within 30 days prior to this competition and hereby confirm that they have not been so concussed. I also confirm that, in the event that a concussion has occurred prior to that, medical clearance for participation has been obtained.
8. I acknowledge that photographs may be taken during the competition by the organizers or other persons and that I may appear in those photographs. In the event that I appear in the photographs, I authorize Taekwondo WA to use and authorize use of the photographs taken at this competition for promotional purposes, including publication on the association websites. I will make no claim against Taekwondo WA for any fee or royalty in relation to the use of the photographs.
9. I further declare that, should the above player/s be selected for a team as a result of this event:
 - a) They will train at the standard expected by the appointed team officials and attend all meetings, training sessions and appointments required as a team member as directed from time to time by any official of the Association.
 - b) Should they fail to meet any obligations as set out herein or fail to observe any regulation or by-law of the Association or fail to comply with any reasonable direction of any officer of the Association or shall, in the opinion of the Association, fail to satisfy any requirements or obligations of a team member, then and in the event I acknowledge that they may be dismissed from the team of the Association and I/they shall not make any claim or demand for any compensation, damages, and/or outgoings incurred by me or them.
10. Any expenses agreed to be paid on my/their behalf by the Association will be and are subject to my conduct, demeanor, performance and behavior being satisfactory in the opinion of the Association and I acknowledge that failure to fully and properly satisfy obligations hereunder may render me/them liable to refund to the Association part or all of such expenses.
11. I declare that I have current sports insurance cover.

I, being the APPLICANT / PARENT / LEGAL GUARDIAN OF THE APPLICANT, hereby acknowledge and declare that I have read and fully understand the terms and conditions set out in the application and consent to be bound by such conditions.

Signed Applicant / Parent / Legal Guardian (Circle one): Date: