

2017 11th Annual
North East Open
COMPETITOR'S REGISTRATION FORM
 Please send this form along with your registration fee (NON-REFUNDABLE)
Registration Deadline, MUST BE RECEIVED by August 1st 2017
Absolutely no applications will be accepted after August 1st 2017.

Important: If any information is missing, application will not be processed.

Team Name: _____

School/Club Name: _____

School/Club Address: _____

City: _____ State: _____ Zip: _____

Instructor: _____

<u>Team Member Name:</u>	<u>Age:</u>	<u>Rank:</u>
<small>(Demo Teams feel free to write additional team members info on back or attach additional sheets)</small>		
AGES 8 & UP ONLY		

All Team Members Must Complete the Waiver Form Individually and submit with the Team Registration

EVENTS	FEES <small>*Per Team</small>
___ Team Synchronized Traditional Forms	___ 1 Event = \$40
___ Team Synchronized Creative Forms	___ 2 Events = \$50
___ Team Synchronized Traditional Weapons	___ 3 Events = \$60
___ Team Synchronized Creative Weapons	___ 4 Events = \$70
___ Team Creative Multi-Directional Breaking	___ 5 Events = \$80
___ Team Demonstration	
Total # of Events Competing in: _____	TOTAL: _____
	Minus \$10 if
	Pre-Reg by 7/1/2017
	Pre-Reg Total: _____

Mail Applications & Payment To:
 North East Open C/O Pil-Sung Martial Arts
 1095C Central Ave
 Albany, NY 12205
 Make certified check or money order Payable to: **North East Open**

Tournament Director: Adam Grogin
 Info@NorthEastOpen.com
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LIABILITY and HOLD HARMLESS RELEASE and WAIVER AGREEMENT

I, _____ have chosen to participate in the

(Print Name of Athlete)

2017 North East Open. I hereby waive any claim I may have at any time against the North East Open, its directors, instructors and agents, Pil-Sung Martial Arts, its agents, Adam Grogin, The Albany Capital Center, its agents, tournament officials, and tournament volunteers.

Regarding any personal injury or damage I may suffer or incur by such participation in the 2017 North East Open, I hereby accept these risks. I agree to waive any claims against any person or organization connected with the 2017 North East Open for any injuries I may sustain and likewise assume full responsibility for all my actions in connection with said tournament.

To my knowledge, I do not have any limiting physical condition or disability that would preclude my participation in the 2017 North East Open.

I also understand that all participants prior to involvement in the 2017 North East Open should obtain a physician's examination.

I further agree that the tournament director for publicity or promotion may use any pictures taken of or by me in connection with said tournament without compensation at this or any other time.

I, the undersigned, do hereby voluntarily submit my application for registration in the 2017 North East Open.

PARTICIPANT SIGNATURE

DATE

PARENT/GUARDIAN SIGNATURE

DATE

(Parent or Guardian sign if participant is under 18)

Relationship to Athlete _____

www.NorthEastOpen.com

Event Director: Adam Grogin

North East Open

1095C Central Ave Albany, NY 12205

(518) 458-1011

EventDirector@NorthEastOpen.com