

(of Parent or Guardian if guest/competitor is under age 18)

Tai Chi Youth Push Hands Tournament Registration Form

Name			Age	Birth L	Date	_/_/_		
Parent / Guardian (if u	nder 18)_							
Phone								
Mailing Address								
Have you read and und	derstood t	he TCY Push Han	ds Tourna	ment Rul	es?	Yes	No	
Do you have any injuri	es, physic	al limitations or l	health rela	ated issue	s?	Yes	No	
If "yes" please explain:								
Your martial arts expe	rience: (li:	sted by highest b	elt rankin	g first)	,			
	Instructor			Belt Rank				
	oolInstructor							
Push Hands Competiti	ion?				Yes _	No		
Tai Chi 1-Minute Form Competition?					Yes _	•		
Tai Chi Self-Defense A	-		s Competi	tion?	Yes _	No		
Single-Event price:	\$25		_					
Second-Event price:	\$15	Thank you fo	• •	•			•	
Third Event price:	\$10	We have been i			•	-	ว drug	
Spectator price each:	\$ 5 x_	aaaictioi 	n , and dim	inisning vi	ioience sin	ice 1996.		
TOTAL PRICE: \$_		Co-Spor	nsored	by Sha	aolin C	hi Ma	ntis	
Tai Chi Youth, or any of the ot responsible for any injuries su tournaments. You, the specta physical rigors and possible ri arts training and competition successsful in every situation combination of continued praabilities. He/she freely assum	uffered while a ator, student, isk of injury in . He/she real and proficien actice, exercs	es of Richard Del Con attending our classes, or competitor is fully herent in participatin izes that not all techni ncy can only be achiev ie of good judgement	nor, is not seminars, or aware of the g in martial iques may be red through a	and B	uddha Kull			
Sianature		Da	to /	/ /	1/2			