

2010 Golden Gate Open Tae Kwon Do Tournament  
**REFEREE, MASTER, COACH and VOLUNTEER FORM**

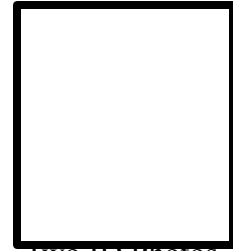
**REFEREE:** United Black Belts of America would be honored to have you serve as an official at our upcoming championships. Each participating Referee will receive: An appreciation award, a tournament T-shirt, Lunch and Dinner.

**MASTERS & INSTRUCTORS:** All Master and Instructor passes must be processed by mail.

**COACH:** Coaches may accompany competitors onto the arena floor, but must leave following Competitors match. Coach pass is \$25 and must be included with this Coaches registration form. Please checks payable to: **Kim's Martial Arts, LLC**

**Volunteer:** To volunteer, please contact Kim's Martial Arts, LLC

**Mail to:** Kim's Martial Arts, LLC  
85 Red Hill Ave.  
San Anselmo, CA 94960  
Phone: (415) 455-0471 Fax: (415) 455-8988



TWO ID Photos

**DEADLINE:** January 22, 2010

Applicant's Name: _____		TKD Rank: _____		Dan _____	
Age: _____	Date of Birth: _____	Sex: _____	Occupation: _____		
Referee Rank: _____		Cer#: _____	Kukkiwon Dan # _____		
Address: _____		City _____	State: _____	Zip: _____	
Name of Instructor: _____					
Name of TKD School: _____					
TKD School Phone: ( ) _____		Home phone: ( ) _____			

I AM ATTENDING THE EVENT AS:

**MASTER**    **INSTRUCTOR**    **VOLUNTEER**    **REFEREE**    **COACH**

In consideration of your acceptance of my registration, I do hereby, for myself, my heirs, executors and administrators waive, release and forever discharge any and all rights and claims or potential claims for damages which occur to me, against the Organizations, Kim's Martial Arts, LLC and all members of the Championships and against any competitor, for any and all traveling to, participate in, and returning from this event. I further understand that I may be dismissed from the premises without compensation of my conduct is not cooperative for the successful operation of this Championship.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_