

2013 New Mexico District

AAU Tae Kwon Do Championships

Saturday, April 13, 2013

Albuquerque Academy
(East Campus Gym)
6400 Wyoming Blvd, NE
87109



- ◆ Forms
- ◆ Breaking
- ◆ Olympic Sparring
- ◆ Point Sparring
- ◆ Creative Forms
- ◆ Electronic Scoring
- ◆ Matted Rings
- ◆ Beautiful Custom Medals
- ◆ AAU Sanctioned Event

Host Hotel:
Comfort Inn and Suites
ONLY \$59 per night
5811 Signal NE
Albuquerque, NM 87113
(505) 822-1090

Weigh In/Credential Pick up at host hotel Friday from 4-7 p.m.
or Saturday at the tournament from 8-9 a.m.

For More Information Contact
Master Antionette Chavez
Region 10 Director
(505) 294-6302, tmkalc@aol.com

- ◆ Registration 8 a.m.
- ◆ Referee and Coaches Meeting 8:30 a.m.
- ◆ Tournament Begins 9 a.m.





2013 New Mexico AAU Tae Kwon Do Championship

April 13, 2013

Albuquerque Academy
6400 Wyoming Blvd NE

Individual Competitor's Registration Form

Last Name _____ First Name _____ MI _____
Street Address _____
City _____ State _____ Zip Code _____
Phone _____ Email _____ Age _____ DOB _____
Weight _____ Height _____ Male ___ Female ___ AAU Number _____

Price: \$65.00 for 1 event, each additional event \$10 per event.

Money order or cashier's checks only. Mail to Takai Mine Karate/Tae Kwon Do, 1027 Juan Tabo NE, Albuquerque, NM. 87112, by March 30, 2013 without penalty. \$15.00 late registration fee if received after March 30, 2013.

Novice: White ___ Yellow ___ Orange ___
Intermediate: Green ___ Blue ___ Purple ___
Advanced Red ___ Brown ___ 1st, 2nd Gups ___
Black Belt: 1st ___ 2nd ___ 3rd ___ 4th ___ 5th ___ 6th ___

Event(s): Please place a check mark in the appropriate event(s) you are competing in.

Forms _____ Creative Forms _____

Olympic Sparring _____ Point Sparring _____

Breaking _____ (Maximum of 3 Breaks)

Pre-purchase an Event T-Shirt for \$20.00

YSm ___ YMd ___ YLg ___ Sm ___ Md ___ Lg ___ XL ___ (add \$5)

Pre-purchase Spectator passes for \$5 (\$10 if purchased at the door)

QTY _____ Total Amount \$ _____

Form of Payment _____ Total Amount Paid _____

Martial Arts School _____ Phone _____
Instructor _____ Email : _____
School Address _____

Liability Waiver

I, the undersigned, for myself, my heirs, administrators and assigns, do hereby covenant and agree as follows. I hereby assume all risk of any personal injury which may result from activities in which I engage at the 2013 New Mexico AAU Championship including supervised and unsupervised activities; that I for myself, my heirs, administrators and assigns, do hereby release Master Antionette Chavez, Takai Mine Karate, Albuquerque Academy, all coaches, officials, individually or collectively, from all liability, including claims at law or in equity for any injury, fatal or otherwise, mental or emotional damages, which may result directly or indirectly from my traveling to, participating, or returning from set tournament or related functions. I understand that Tae Kwon Do/Martial Arts is a contact sport with a risk of serious injury, possibly death, to me, or my children who may enter said tournament. I also assume all risk of my personal property at the tournament premises if lost or stolen. I also understand that there are no refunds.

I have read and fully understand the above waiver and agree with its terms.

Signature of competitor if 18 or older

Date

Signature of Parent or Legal Guardian if under 18 Years of Age

Date



NM AAU State Tae Kwon Do Championships Schedule of Events April 13, 2013

Athlete Arrival: You should plan to arrive no later than 1 hour prior to the time listed. You must report to the holding area at the time of the event listed below.

Schedule:	7:00 a.m.	Doors Open
	8:00 a.m.	Registration Begins
	8:30 a.m.	Coaches and Referees Meeting
	9:00 a.m.	Forms 3-5, 6-7, 8-9 All Ranks
	9:00 a.m.	Breaking 10-11 All Ranks
	10:00 a.m.	Forms 10-11 All Ranks
	10:00 a.m.	Olympic Sparring Ages 3-5, 6-7,8-9 All Ranks
	10:30 a.m.	Olympic Sparring 10-11
	11:00 a.m.	Forms 12-13 All Ranks
	11:30 a.m.	Breaking 9 & Under All Ranks
	12:00 p.m.	Point Sparring 11 & Under All Ranks
	12:00 p.m.	Olympic Sparring 12-13, All Ranks
	12:00 p.m.	Breaks 14-17 All Ranks
	1:00 p.m.	Breaking 12-13 All Ranks
	1:00 p.m.	Forms 14-17 All Ranks
	2:00 p.m.	Point Sparring 10-11, 12-13 All Ranks
	2:30 p.m.	Breaking All Adults All Ranks
	3:00 p.m.	Olympic Sparring 14-17 All Ranks
	4:00 p.m.	All Creative Forms Divisions 17 & Under, All Ranks
	4:00 p.m.	Olympic Sparring All Adults
	4:00 p.m.	Point Sparring 14 -17
	5:00 p.m.	All Adult Point Sparring
	5:00 p.m.	Creative Forms Divisions All Adults, All Ranks
3:00 p.m.		Presentation of the Most Supportive School Award Trophy Furthest Traveled - Gold Medal

Other Information

Mail registration fees to:

Takai Mine Karate/Tae Kwon Do
1027 Juan Tabo Blvd. NE
Albuquerque, NM 87112
(505) 294-6302
takaiminekarate.com

Host Hotel: Only \$59 per night!

Comfort Inn and Suites

5811 Signal NE
Albuquerque, NM 87113
(505) 822-1090 Fax: (505) 822-1154

Mention AAU Tae Kwon Do State Qualifier \$59+ tax per night. Free Hot Breakfast. Free high speed internet, indoor pool and hot tub. Reservations **MUST BE MADE** by March 30, 2013 to guarantee the rate. (505)-822-1090. Rooms will fill quickly.

Event Location:

Albuquerque Academy
(East Campus Gym)
6400 Wyoming Blvd NE, 87109

Directions:

Starting from Signal Ave NE

- 1 Head east on Signal Ave NE toward San Pedro Dr NE
 - 2 Take the 1st right onto San Pedro Dr NE
 - 3 Turn left onto Paseo Del Norte Blvd NE
 - 4 Turn right onto Wyoming Blvd NE
 - 5 Turn left onto Burlison Dr NE
 - 6 Turn right toward Campus Rd NE
 - 7 Turn left onto Campus Rd NE
- Arriving at Campus Rd NE

Total: 3.9 mi - about 11 mins



Coaches:

- ◆ Each school will receive 2 free coaches passes.
 - ◆ Additional Coaches Passes are \$20
- ◆ Coaches are expected to wear a blue AAU Coaches shirt.

Weigh Ins/Credential Pick up
Friday 4-7 p.m. at Comfort Inn and Suites or
day of tournament 8-9 a.m.

Spectators:

Spectators passes can be purchased on the Competitor Application or at Comfort Inn and Suites (host hotel) for \$5.00 (if purchased on the Competitor Application, passes can be picked up at the same time Competitor Credentials are picked up). Passes can also be purchased on the day of the tournament for \$10.00

Referees Seminar:

The Referee's Seminar will be held March 16, 2013 from 9 a.m. to 3 p.m. at Takai Mine Karate. We would like to invite and encourage all people who are eligible to referee to attend this seminar. If you want to referee at the tournament then it is highly recommended that you attend this seminar. Please fill out the out a Referee Application (last page of this packet) and bring it with you to the seminar along with your payment. This is an official AAU Sanctioned Referee Seminar.



Picture # _____



AAU TAEKWONDO OFFICIAL CERTIFICATION APPLICATION FORM

If completing this form on your computer, use 'arrow keys' to navigate through application

I took the current online coaches clinic Completion date of clinic _____

If you cannot show proof of taking the online clinic, you must pay the \$35 clinic fee for this clinic

Your Name
First Name (the name you go by) M Last Name

Address _____

City _____ State _____ Zip _____

Phone # _____ (If keying, enter only numbers --ie. 9991234567)

E-Mail Address _____

Date of Birth _____ Age _____ Sex _____ AAU District _____

Current AAU Membership # _____ **County** in which you reside _____
(not COUNTRY, but COUNTY)

Have you taken an AAU **Official's clinic** within the last 5 yrs? _____ (If no, skip next line)

What is your classification? _____ What is your certification number? _____

Do you train in martial arts? _____ If so, what rank(s) do you hold? _____

What forms do you study? (Put an 'X' by all that apply) _____ WTF _____ ITF _____ TSD/MDK

Indicate any AAU-TKD office(s) you currently hold _____ Clinic Administrator _____ Regional Director _____ District Sports Director

M.A. School _____

Instructor _____

Please indicate the clinic you will be attending

Clinic Location _____ **Clinic Date** _____

Can be filled out by clinic administrator and used for receipt

Name _____ Fee Pd: \$35 _____ How Pd: _____ CK # _____

Signature / Initials of Clinic Administrator _____