



IRISH OPEN 2010 Tournament Application Form

Name of School:		Association:	
Instructor's Name:		Contact no:	
Address:			

Competitors' Details: Please clearly 'X' the divisions each competitor is entering

No.	First Name	Family Name	Grade (Kup / Dan)	Date of Birth	Age on day of championsh ips	Weight (kg)	M/F	Patterns	Sparring	Power	Special Technique	Obstacle Course	Entry Fee €
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													

Total: € ____

You must supply 1 qualified umpire with up to and including every 10 students.

(Example : 6 competitors = 1 Umpire, 12 Competitors = 2 Umpires)

Details of umpire associated with these competitors

First Name	Family Name	Grade	Qualification

I declare that the above information is correct and that these competitors may be refused entry to compete if the above listed umpire is not available to umpire at the championships. All these competitors have given me written consent that they can be i) given Medical Treatment and First Aid and ii) be photographed and videoed at this event.

Instructor's signature: _____ **date:** _____

SEND TO: Mr F. Keane, 75 Westpark, Blessington, Co. Wicklow.

For more tournament information visit www.rita-itf.org

태권도



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11													
12													
13													
14													
15													
16													
17													
18													
19													
20													

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Total: € ____

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21													
22													
23													
24													
25													
26													
27													
28													
29													
30													

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