



Traditional TaeKwon-Do Alliance-Colorado State Championship

Mail-in Registration

Competitor's Name (First/Last): _____

Age: _____ Height: _____' _____" Weight: _____ lbs. Sex: (Check one) M___ F___

Rank: _____ TaeKwon-Do School: _____

Parent's/Guardian's Name (if applicable): _____

Address: _____

Phone #: _____ Email: _____

Other Emergency Contact: _____

Events: (Check all that apply)

TTA Members

Sparring: (\$40) _____ Patterns: (\$40) _____ Sparring & Patterns: (\$50) _____

Non TTA Members

Sparring: (\$50) _____ Patterns: (\$50) _____ Sparring & Patterns: (\$60) _____

TTA Members and Non TTA Members

Team Blackbelt Patterns: (\$50) _____ (fee is total per team and must be paid entirely at this time)

*** All Mail-in Registrations are due no later than September 18, 2019**

Make checks payable to: Traditional TaeKwon-Do Alliance

Mail to:

TTA
Adrienne Harness
1606 Ashcroft Ct., Longmont, CO 80501

Please email questions to: adrienneamb@yahoo.com