

2025 OFFICIAL COMPETITOR REGISTRATION FORM



2025 BAY AREA OPEN TAE KWON DO CHAMPIONSHIP

Register Online:
www.bayareaopentkd.com

September 13th, 2025
Washington High School
38442 Fremont Blvd.,
Fremont, CA 94536

REGISTRATION CHECKLIST

Complete this Form

Signed Liability
Release Waiver

Payment made out to:
MASTER JIN SHIM or
U.S TAEKWONDO ACADEMY

Admission: \$20

Children under 5yrs: FREE

1. Competition Events and Fees

Check the Events you wish to participate in: *(Both Columns must be Checked!)*

- | | |
|--|--|
| <input type="checkbox"/> 1 Event \$ 120 | <input type="checkbox"/> Sparring / World Class Sparring |
| <input type="checkbox"/> 2 Events \$ 140 | <input type="checkbox"/> Poomsae / World Class Poomsae |
| <input type="checkbox"/> 3 Events \$ 160 | <input type="checkbox"/> Open Poomsae |
| <input type="checkbox"/> 4 Events \$ 180 | <input type="checkbox"/> Weapon Form |
| <input type="checkbox"/> 5 Events \$ 200 | <input type="checkbox"/> Power Hand Breaking |
| <input type="checkbox"/> 6 Events \$220 | <input type="checkbox"/> Direction Breaking |
| <input type="checkbox"/> 7 Events \$240 | <input type="checkbox"/> Speed Breaking |
| <input type="checkbox"/> 8 Events \$260 | <input type="checkbox"/> Team Poomsae (3 People —mixed gender) |
| <input type="checkbox"/> 9 Events \$280 | <input type="checkbox"/> Mixed Pair Poomsae (1male & 1female Only) |



Check the
Box

White/Yellow/Orange

Purple/Green/Blue

Brown/Red

Black _____ Dan/Poom

2. Competitor Information

First Name: _____ Last Name: _____ MI: _____

Gender: Male Female D.O.B: ____/____/____ Age: _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

Primary Phone: (____) _____ -- _____ Secondary Phone: (____) _____ -- _____

Height: ____' ____" Weight: ____kg Country (International): _____

3. If Under 13 years of age

Parent/Guardian: _____ Phone: (____) _____ -- _____

4. Studio/Do Jang Information

Studio/Do Jang: _____

Master/Instructor: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: (____) _____ -- _____ Fax: (____) _____ -- _____

Email/website: _____

5. Further Instructions

- Applications must be received **no later than September 10th, 2025**
- Applications received after **September 10th, 2025 will result in a \$20 late fee.**
- Door registration is \$140 (First event)
- Attach cashier's check or money order made out to **Master Jin Shim or U.S. Taekwondo Academy** for entry fees.
- Send all registration materials to:
U.S. Taekwondo Academy
Attn: Bay Area Open TKD Championship
826 E. Fremont Ave #B
Sunnyvale, CA 94087

For More Information

Phone number: (408) 497-5656
Email: ustkda@gmail.com
Website: www.ustasv.com

Email: ustkda@gmail.com website: www.BayAreaOpenTKD.com