

2014 Region 9 Fall Clinic with the Masters

When	Saturday, September 13, 2014
Where	Meriden Boys & Girls Club 15 Lincoln Street Meriden, CT 06451
Registration	Until midnight September 9, 2014 - Registration \$25 online https://events.membersolutions.com/event_detail.asp?content_id=49441 September 10-13, 2014 - Registration \$35 at the door (Use application below)
Schedule	09:00a-09:45a : Registration 09:45a-10:00a : Line Up / Opening Comments / Bow In 10:00a-10:45a : Session #1 10:45a-10:55a : Break 10:55a-11:40a : Session #2 11:40a-12:10p : Lunch 12:10p-12:55p : Session #3 12:55p-01:05p : Break 01:05p-01:50p : Session #4 01:50p-02:00p : Break 02:00p-03:00p : Black Belt Promotion Ceremony / Closing Comments / Bow Out (Practice for the Black Belt Promotion Ceremony will run 10:00a-02:00p)
Groups	Tiny Tigers and Little Dragons (ages 6 and under) Youth (ages 7-12) Beginner 5th Gup and below Youth (ages 7-12) Advanced 4th Gup and above Adult (ages 13 and over) All Gup Ranks Black Belts (all ages) All Dan Ranks Parents Black Belt Candidates Demo Practice
Instructors	Master Efrain Valentin Master Jared Arteca Master John Costa Master Jen Couture Master Dan Farrelly Master Scott Jones Master Bob Meegan Mrs. Jan Meegan Master Mike Molinaro Master Mike Porco, Jr. Mr. Rodney Ralph Master Kevin Tolderlund Mr. Orlando Valentin Mr. Ahmed Hernandez Mr. Jeff Bulissa

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Offline Registration Form

Until midnight September 9, 2014 - Registration \$25 online
https://events.membersolutions.com/event_detail.asp?content_id=49441

September 10-13, 2014 - Registration \$35 at the door
Make checks payable to: Region 9 Fund

(Please type or print clearly)

Name: _____ WTSDA# _____

Studio: _____

Age: _____ Birth Date: _____ Sex: _____ Rank: _____

Phone: (home) (_____) _____ ; (cell) (_____) _____

E-Mail: (print clearly!) _____

Are there any special Medical Problems? No Yes

If yes, please explain below, be specific

WAIVER AND AGREEMENT

I, the undersigned, assume all risk for injury that I may sustain in connection with this seminar and waive all claims against instructors, any other students, participating studios, the Regional Director, the World Tang Soo Do Association and its officials. I further understand that I will strictly observe and obey all rules and regulations governing this seminar.

DATE: _____ STUDENT SIGNATURE: _____

DATE: _____ PARENT: _____

(Signature if student is under 18 years old)

FOOD FOR LUNCH & SNACKS WILL BE FOR SALE ALL DAY AT THE CLINIC

SOUVENIRS WILL BE AVAILABLE AT THE SCHOLARSHIP TABLE.