

# Pan American Taekwondo Championship

Pan American Senior Poomsae Championship

Pan Am Open Taekwondo Championship

Pan Am Para-Taekwondo Championship



8-12 December 2010 Taekwondo linking the entire continent Monterrey, N.L. Mexico













# The Pan American Taekwondo Union

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# Pan American Senior Poomsae Championship Pan Am Open Taekwondo Championship Pan Am Para-Taekwondo Championship



8-12 December 2010 aekwondo linking the entire continent Monterrey. N.L. Mexico

We, hereby submit this application to participate in

B. //	T 1	are the state		
iviexican	Taekwon	ao Feac	eration	AC

Av. Río Churubusco puerta 9
Cd. Deportiva Magdalena Mixhuca,
México, D.F. C.P. 08010
Tel. Directo y Fax: 5654.6794 / 5803.0114
Presidente Lic. Juan Manuel López Delgado
Website: www.femextkd.net.mx

Audi 633				
Tel. No:		Fax. No:	E-mail:	
Position		No. of Persons	Remarks	
044:-!	Male team			
Officials	Female team			
0	Male team			
Contestants	Female team			
Others				
0111010				

Signature of President Name of President Date













Applying	Member	<b>National</b>	<b>Federation:</b>
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	0.00	
	Official	S:

Posit	ion	Last Name	First Name	Date of birth (dd-mm-yy)
Head of Team	Male			
	Female			
Managan	Male			
Manager	Female			
Coach	Male			
Coach	Female			
Trainer	Male			
Trainer	Female			
Team	Male			
Doctor	Female			

# Contestants: **MALE TEAM**

Weight	Last Name	First Name	Date of birth (dd-mm-yy)	Kukkiwon Certificate No.
Male -54kg				
Male -58kg				
Male -63kg				
Male -68kg				
Male -74kg				
Male -80kg				
Male -87kg				
Male +87kg				













Weight	Last Name	First Name	Date of birth (dd-mm-yy)	Kukkiwon Certificate No
emale -46 kg				
emale -49 kg				
emale -53 kg				
emale -57 kg				
emale -62 kg				
emale -67 kg				
emale -73 kg				
emale +73 kg				
Remarks:	e sent back to the Orgar	lete « O lue » lue » l	latar than New 15, 201	_
	copy for your own record		later than Nov. 15, 201	0.

Entries arriving after the expiration of the required deadlines will not be taken into consideration, except in the case of circumstances, with approval of the President of the PATU. Any invited member national associations who failed to submit this entry by the designated







deadline will be replaced with the substituted nations without prior notice







	Applying Member National Federation:
Male Team Me	ember Photos
	HEAD OF TEAM
	Name:
	MANAGER
	Name:
	COACH
	Name:
	TRAINER
	Name:
	Name.
	DOCTOR
	Name:













FIN54 Kg Name:	LIGHT74 Kg Name:
FLY58 Kg Name:	WELTER80 Kg Name:
BANTAM63 Kg Name:	MIDDLE87 Kg Name:
FEATHER68 Kg Name:	HEAVY. +87 Kg Name:















	Applying Member National Federation:
Female Team Mer	mber Photos
	HEAD OF TEAM
	Name:
	MANAGER
	Name:
	СОАСН
	Name:
	1
	TRAINER
	Name:
	DOCTOR .
	DOCTOR Name:













FIN46 Kg Name:	LIGHT62 Kg Name:
FLY49 Kg Name:	WELTER67 Kg Name:
BANTAM53 Kg Name:	MIDDLE73 Kg Name:
FEATHER57 Kg Name:	HEAVY. +73 Kg Name:















### To: Mexican Taekwondo Federation AC

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Website: www.femextkd.net.mx

Group indemnity FEMALE / MALE TEAM
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The Signer	
President's Name:	
Address:	
Tel:	Fax:
Name of National Federation:	

The signer is authorized to make this declaration and has confirmed by his/her signature that liability insurance has been acquired for the officials and competitors participating in 17th Pan American Taekwondo Championships to be held in Monterrey, Nuevo León, México on December 9~10, 2010. This insurance is liable for all damages of persons or belongings, and releases the Organizing Committee, the World Taekwondo Federation (WTF), Pan American Taekwondo Union, Mexican Taekwondo Federation, Nuevo León State Taekwondo Association, and all related personnel and officials from any liability or indemnity. It is expressly confirmed that, in case of damages of persons or belongings, claims for compensation and demands whatsoever cannot be put forth to the Organizing Committee, the World Taekwondo Federation (WTF), Pan American Taekwondo Union, Mexican Taekwondo Federation, Nuevo León State Taekwondo Association, and all related personnel and officials.

Signature of President	Name of President	Date

\*Please fill out and send this form to the Organizing Committee by E-mail or Fax. No later than November 15, 2010. FederationSeal or Stamp













# To: Mexican Taekwondo Federation AC

Av. Río Churubusco puerta 9 Cd. Deportiva Magdalena Mixhuca, México, D.F. C.P. 08010

Tel. Directo y Fax: 5654.6794 / 5803.0114 Presidente Lic. Juan Manuel López Delgado Website: www.femextkd.net.mx

No player or official will be accredited for 17th Pan American Taekwo	ondo Championships without full completion of this form.
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* Do you have any medical problem?	Yes (	)	No (	)	
(If yes, please explain on the bottom of this form)  * Do you require any special medication?	Yes (	)	No (	)	
The undersigned, in consideration of his or her particithe Organizing Committee, the World Taekwondo Fe Association, and all related personnel and officials, re 17th Pan American Taekwondo Championships, aris	ederation esponsib sing out o	n (WTF ble for a of, or in	), Pan Ame any and/or any way co	erican Taekwondo Union, Mexican Taekwondo Fe all injuries and/or illnesses, which may be suffere onnected to, his or her participation at the 17th Pa	deration, Nuevo León State Taekwond ed by the individual registered during th n American Taekwondo Championship
Name in full :					
Date of Birth :					
Home address :					
I hereby declare, as confirmed by my signature, that lial (Insert name of your country) participating at 17th Pan A This insurance covers all damages to persons and be Taekwondo Union, Mexican Taekwondo Federation, demands whatsoever in respect thereof.	American elonging	Taekw s, and	ondo Cham indemnifie	pionships in Monterrey, Nuevo León, México. s that the Organizing Committee, the World Taek	wondo Federation (WTF), Pan America
Explanations of Medical Problems:					
Signature of President	_		1	Name of President	Date
*Please fill out and send this the Organizing Committee by I Fax. No later than November 1	E-mai	l or		FederationSeal or S	Stamp













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Presidente Lic. Juan Manuel López Delgado
Website: www.femextkd.net.mx

Nation	
Total number of persons	
Number of officials	
Number of contestants	
Date of Arrival	
Time of Arrival	
City of Departure	
Flight No.	
Date of Departure	
Time of Departure	
City of Arrival	
Flight No.	

Important Notice: This document must be returned to the Organizing Committee NO LATER THAN NOVEMBER 15, 2010 to ensure appropriate transportation arrangements for your team.













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Presidente Lic. Juan Manuel López Delgado
Website: www.femextkd.net.mx

Participating Nation:					
Contact Person:					
Phone No.: Mobile#:					
E-Mail: Fax:					
Total Number of people:					
Hotel Name: Room Rate: Single: ( ) Double: ( )					
Hotel Name: Room Rate: Single: ( ) Double: ( )					
Hotel Name: Room Rate: Single: ( ) Double: ( )					
Hotel Name: Room Rate: Single: ( ) Double: ( )					
Number of Single Rooms: Number of Double Rooms:					
Triple or Quadruple Rooms at the Olympic Training Center:					
Available only on Special request. Availability based on first come first serve policy.					
Above Room Rates Include: Breakfast, Transportation to Airport and all Taxes.					
A 50 % deposit of full amount is requested with every inscription. With the confirmation, a final invoice should be sent and full payment is expected imperatively NOVEMBER 7, 2010 After this date no refund will be possible in case of cancellation.					
Method of Payment Information:					







