



UCHTA®
(Utah Chang Hun Taekwon-do Alliance)
Presents:



2024 UCHTA STATE TKD CHAMPIONSHIPS
(Invitational Tournament)

Sponsored by: Utah Chang Hun Taekwon-do Alliance - UCHTA®
(Open to USTF Members and Special Invited Guests Only)

DATE:
Saturday November 9, 2024

LOCATION:
Community of Grace Presbyterian Church (Main Gym)
2015 East Newcastle Drive
(About 89th South & Highland Drive)
Sandy, UT 84093-1622

Competition in:
INDIVIDUAL: Patterns, Sparring, Breaking (13 year min)
(Possible Breaking for Under 12 yrs. & Pee-Wee breaking on plastic boards, depending on interest)

USTF/ITF Rules will apply to all events

Entrance Fees:
Free for All Spectators!

Competitors pre-registering or at the door:

One event	Two Events
\$20.00	\$30.00

Time Schedule:
8:00 am – Check In
8:45 am – Rules Meeting
9:00 am – Black Belt Patterns Begin
Colored Belts Following, White through Red
Patterns then Sparring
Black Belt Sparring Following

Schedule of Events:

- **We will be setting up rings and bracketing as early as we can accurately do so.
- **Black Belt Patterns Competition will begin FIRST, as close to 9:00 a.m. as possible.
- **Colored Belt Competition, Patterns then Sparring, will follow Team Patterns Exhibition.
- **Black Belt Sparring will Follow the Colored Belt Competition.
- **Based on the time constraints, some events may need to be juggled a bit. This will be a fluid process throughout the day.

8:00 a.m. - Check-In Begins

All competitor registration forms must be submitted for bracketing, prior to the rules meeting.

Bracketing may be modified to accommodate the variety of competitors at the discretion of the Tournament Director.

This may include, but is not necessarily limited to:
Combining similar ranks, weights, and/or age brackets.

8:45 a.m. - Rules Meeting

Note: HEAD GEAR is now Mandatory for ALL Sparring Divisions.

9:00 a.m. – Black Belt Pattern Competition Begins

Followed by Colored Belt Competition

Followed by Black Belt Sparring

NOTE: SPARRING POINT UPDATE

Continuous Sparring Point Values to Follow the Updated USTF System

1 point for ANY Legal “Standing” Hand Technique to the Body or Head.
2 points for ANY Legal “Jumping” Hand Technique to the Body or Head

1 point for ANY Legal “Standing” Foot Technique to the Body.
2 points for ANY Legal “Standing” Kick to the Head.
2 points for ANY Legal “Jump” Kick to the Body.
3 points for ANY Legal “Jump” Kick to the Head.



2024 UCHTA STATE TKD Championships

November 9, 2024



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Competitor Registration

Make Checks payable to and Send forms and payments to:

UCHTA®
3107 South Lincoln Street
Salt Lake City, UT 84106
Phone: 801-550-4714 / 801-633-6909

Competitor Name: _____ USTF No: _____
 Address: _____
 City/State/Zip: _____
 Email Address: _____
 Rank: _____ Contact Phone #: (____) _____ - _____
 TKD School: _____
 Age: _____ Sex: Male / Female Height: _____ ft. _____ in. Weight: _____ lbs.

Events Entered:

P <input type="checkbox"/> S <input type="checkbox"/> B <input type="checkbox"/> for official “bracketing” use only	<input type="checkbox"/> Patterns Only (Pre-registered or at the door \$20) <input type="checkbox"/> Sparring Only (Pre-registered or at the door \$20) <input type="checkbox"/> Patterns & Sparring (Pre-registered or at the door \$30) <input type="checkbox"/> Breaking, Individual, 13+(Pre-registered \$10; at the door \$13) (\$ (Possible under 12 yrs & PeeWee Breaking is at no charge)	(\$ _____) (\$ _____) (\$ _____) (\$ _____)	Total: (\$ _____)
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For use of individual accepting fees:

Amount Paid: _____ Date: _____ Received By: _____

I understand that there are certain risks involved with Taekwon-Do competition and that reasonable efforts will be made to prevent injury or accident. I certify that I am in good physical condition and that **I am covered by a personal health insurance policy in the event of injury.** I hereby release the organizers, fellow competitors, judges and officials, sponsors, advertisers, the United States Taekwon-Do Federation and its officers, UCHTA and its officers, and the owners of the facilities where the tournament is held, from any and all liability for injuries sustained or sicknesses contracted while participation in or watching this tournament. I also release any photographs or videotape taken of me during this event to be used by the sponsors for Taekwon-Do related publicity, and waive all claims for compensation for the use of said photographs or videotape.

Personal Health Insurance Coverage Provided by: (Company Name) _____

Dated this _____ day of _____ 2024.

 Competitor’s Signature

 Signature of Parent if Competitor is under 18 years of age



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**Release and Waiver of
Liability and Indemnity Agreement**
(Read Carefully Before Signing)

In consideration of being permitted to participate in any way in the Martial Arts Program indicated below and/or being permitted to enter for any purpose any restricted area (here in defined as any area where in admittance to the general public is prohibited), the Participant (if an adult), or parent(s) and/or legal guardian(s) of the minor participant named below agree (if a minor):

1. The Participant (if an adult) or parent(s) and/or legal guardian(s) will instruct the minor participant (if a minor) that prior to participating in the below martial arts activity or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agree that, if at any time, I feel anything to be UNSAFE; I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
2. I/We fully understand and acknowledge that:
 - a. There are risks and dangers associated with participation in martial arts events and activities which could result in bodily injury partial and/or total disability, paralysis and death.
 - b. The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe.
 - c. These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releasees named below.
 - d. There may be other risks not known to us or are not reasonably foreseeable at this time.
3. I/We accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releasees named below.
4. I/We HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the martial arts facility used by the participant, including it owners, managers, promoters, lessees of premises used to conduct the martial arts event or program, premises and event inspectors, underwriters, consultants and others who give recommendations, directions or instructions to engage in risk evaluation or loss control activities regarding the martial arts facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purpose herein referred to as "Releasee"...From all liability to the undersigned, my/our personal representatives, assigns, executors, heirs and next to kin For any and all claims, demands, losses or damages and any claims or demands therefore on account of any injury, including but not limited to the death of the participant or damage to property, arising out of or relating to the events(s) caused alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
5. I/We HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
7. On behalf of the participant and individually, the undersigned partners(s) and/or legal guardian(s) for the minor participant executes this Waiver and Release. If, despite the release, the participant makes a claim against any of the Releasees, the parents(s) and/or legal guardian(s) will reimburse the Releasee for any money which they have paid to the participant, or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Martial Arts School: _____

Participant Signature: _____

Parent or Guardian Signature (if minor): _____

Printed Name of Participant: _____

Address of Participant: _____

Received by: _____

Date / Registrar Signature / Printed Name