

TEAM WEAPONS Registration Form

**BLACK BELT COED TEAM SPARRING
Registration Form
(3 man, 1 woman teams)**

Name _____
 Name _____
 Name _____
 Name _____
 Name _____
 Name _____
 Name _____
 Team Representative _____
 Team Name: _____
 Country Being Represented _____
 Circle One: Juniors Adults Division Number _____
 (Minimum of 3 Teams in Each Division needed to Hold the Event)

Name _____
 Name _____
 Name _____
 Name _____
 Team Coach _____
 Team Name: _____
 Country Being Represented _____
 Division Number _____
 (Minimum of 2 Teams in Each Division needed to Hold the Event)
 (Teams are made up of 3 Men & 1 Woman)

TEAM SYNCHRONIZED FORMS Registration Form

BE SURE TO USE THIS FORM WHEN REGISTERING FOR THE TEAM COMPETITIONS. THE OTHER FORM (PAGE 3) IS FOR INDIVIDUAL COMPETITION ONLY.

Name _____
 Name _____
 Name _____
 Name _____
 Name _____
 Name _____
 Team Representative _____
 Team Name _____
 Country Being Represented _____
 Circle One: Juniors Adults Division Number _____
 (Minimum of 3 Teams in Each Division needed to Hold the Event)

YOU MUST PRE-REGISTER - REMEMBER EACH COUNTRY OR GROUP CAN PRESENT MORE THAN ONE TEAM IN EACH CATEGORY.

REGISTER NOW AND COMPETE AGAINST THE WORLD AT THE :

**2007 WORLD MARTIAL GAMES VIII
in CASTLEBAR, IRELAND**

TEAM DEMO FORMS Registration Form

REGISTRATION FORM

(Pre-Registration Team Fees Must be Postmarked by July 1st, 2006)

Team Name _____
 Team Representative _____
 Circle: Juniors Adults Division Number _____
 Team Name _____
 Country Being Represented _____
 (Minimum of 3 Teams in Each Division needed to Hold the Event)

Team Reps Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: () _____
 School Name: _____
 Address: _____

3 Person Junior Team Sparring Registration Form

City: _____ State _____ Zip _____
 BLKBLT COED TEAM SPARRING FEE: (\$100.00) \$ _____
 3 PERSON JUNIOR TEAM SPARRING FEE (\$75.00) \$ _____
 TEAM WEAPONS FORMS (\$65.00) \$ _____
 TEAM SYNCHRONIZED FORMS (\$65.00) \$ _____
 TEAM DEMO STYLE FORMS (\$65.00) \$ _____
 AMOUNT ENCLOSED FOR TEAM COMPETITION \$ _____

Name _____
 Name _____
 Name _____
 Team Representative _____
 Team Name: _____
 Country Being Represented _____
 Circle: Juniors Boys Girls Division Number _____
 (Minimum of 3 Teams in Each Division needed to Hold the Event)

PLEASE MAKE MONEY ORDERS OR CHECKS (IN U.S. CURRENCY) PAYABLE AND MAIL TO
W.O.M.A.A.,
3 ELM STREET,
BRIDGEVILLE, DELAWARE 19933

Fill out Form Completely for each Team Event you are Competing In. Make Copies if necessary, and send with Full Payment of Appropriate Fees by Deadline Date: March 15th, 2007, NO REFUNDS!