

**Twelfth Annual Collegiate Wushu Championships**  
**Burnham Pavilion • Stanford University • March 1, 2008**  
**Registration Form and Waiver**

**NOTE:** For those competing in ADVANCED Changquan or Nanquan who intend to perform moves which qualify for difficulty points -- please list the following information for each movement, using the provided difficulty forms on the site. Mail the difficulty forms along with your registration.

- Name of the move
- Which form it is in (Changquan or Nanquan, Advanced only)
- Section number in the form where it occurs
- Difficulty level (A, B or C)
- Any other relevant information

**Competitor Information:**

Name:  
First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_  
Birthdate (mm/dd/yy): \_\_\_ / \_\_\_ / \_\_\_  
Gender: F / M

Level:  
\_\_\_ Beginner (< 1 yr experience)  
\_\_\_ Intermediate (1-3 yrs experience)  
\_\_\_ Advanced (> 3 yrs experience)

Competitor Class:  
\_\_\_ Currently enrolled student - Undergraduate  
\_\_\_ Currently enrolled student - Graduate  
\_\_\_ One-year alumnus or non-enrolled

Competing for All-Around? (Advanced only) Y / N

Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_  
State/Province: \_\_\_\_\_  
Zip/Postal code: \_\_\_\_\_  
Country (if not USA): \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Email address: \_\_\_\_\_

Emergency contact information:  
Full name: \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Relation: \_\_\_\_\_

College or university (full name): \_\_\_\_\_

Instructor (and wushu school if different from college or university):  
\_\_\_\_\_

**Event Information:**

Check all that apply. You may not change events once the registration form has been submitted.

For open forms: specify the style.

For team group sets: enter your team name, contact name, and contact email address.

Contemporary - Changquan  
 Contemporary - Nanquan  
 Contemporary - Wushu Open Empty Hand

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Contemporary - Wushu Open Weapons

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Internal - Chen Taiji  
 Internal - Yang Taiji  
 Internal - 42 Form Combined Taiji Compulsory  
 Internal - Open Empty Hand

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Internal - Open Weapons

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Internal - Taiji Sword  
 Traditional - Open Empty Hand

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Traditional - Open Weapons

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Broadsword  
 Straight sword  
 Staff  
 Spear  
 Nangun  
 Nandao  
 Team Group Set

Team Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Email: \_\_\_\_\_

### Registration Fee:

Please make checks payable to Stanford Wushu.

\$35: Registration by early deadline February 16, 2008 (incl first event)  
 \$45: Registration by final deadline February 23, 2008 (incl first event)  
 \$5: Each additional event  
 TOTAL

### Mail to:

Stanford Wushu  
PO Box 17573  
Stanford, CA 94309

### Waiver/Release Agreement

I, the undersigned, acknowledge that I have voluntarily chosen to participate in the Twelfth Annual National Collegiate Wushu Championships sponsored by the Stanford Wushu Club. I have full knowledge of the risks that this activity presents, including travel to, participation in, and returning from the activity or event. I understand that by being permitted to participate in martial arts activities, I agree to assume any and all risks of injury or death. I further understand and agree to assume responsibility for all risk of theft, loss, or damage of personal property which occurs at any time arising out of my participation in martial arts activities.

I understand and agree that as a condition of participation in martial arts activities, I further agree to release liability and indemnify Stanford University, the officers, directors, agent, employees, assigns, successors, or lessors from any damage, injury, death to myself or to any person or property, in any way connected with my participation

in martial arts activities.

I understand and agree that I have carefully read this agreement and fully understand all of its terms and conditions. I understand that this is a release of liability which could legally prevent me from filing suit or making any other claim for damages in the event of my death or injury to me. With this knowledge, I am entering into this agreement freely and voluntarily. I agree that it is binding on me, my assigns, and legal representatives.

I understand and agree that I have read all of this waiver and release, have provided all necessary information, and have signed in the appropriate places.

I also give permission to use, reprint, and reproduce any photograph or video taken of me and any written material supplied by me during martial arts activities.

Participant's Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Parent or Guardian's Signature \*: \_\_\_\_\_

Date Signed: \_\_\_\_\_

\* Required of individuals under 18 years of age