

10th World Wushu Championships
Preliminary Entry Form
 Taolu Competition

Federation _____
 Address _____
 Telephone No. _____
 Facsimile No. _____

Team Manager _____
 Team Coach _____
 Team Doctor _____

Competitors (Please fill in the number of competitors)

EVENT	MALE	FEMALE
1. Changquan		
2. Jianshu		
3. Daoshu		
4. Qiangshu		
5. Gunshu		
6. Taijiquan		
7. Taijijian		
8. Nanquan		
9. Nandao		
10. Nangun		
11. Dual Events		

Note:

This form must be returned to the Organizing Committee of the 10th World Wushu Championships by mail or fax no later than 24:00 (Local Time), **August 20, 2009.**

 Signature of President/Secretary General (With Federation Seal)

 Date

10th World Wushu Championships

Preliminary Entry Form

(Sanshou Competition)

Federation _____

Address _____

Telephone No. _____

Facsimile No. _____

Team Manager _____

Team Coach _____

Team Doctor _____

Competitors (Please fill in the number of competitors)

CATEGORY	MALE	FEMALE
1. 48kg		
2. 52kg		
3. 56kg		
4. 60kg		
5. 65kg		
6. 70kg		
7. 75kg		
8. 80kg		
9. 85kg		
10. 90kg		
11. 90kg+		
Total Number of Competitors		

Note:

This form must be returned to the Organizing Committee of the 10th World Wushu Championships by mail or fax no later than 24:00 (Local Time), **August 20, 2009**.

Signature of President/Secretary General (With Federation Seal)

Date

10th World Wushu Championships

Final Entry Form

(Taolu Competition)

Federation _____
 Team Manager _____
 Team Coach _____
 Team Doctor _____
 Team Judge _____
 Observers _____

Competitors (All names in capital letters. Please underline the surname.)

NO	ATHLETE'S NAME (IN ENGLISH)	ATHLETE'S NAME (IN CHINESE)	SEX	AGE	COMPETITION EVENT PLEASE CIRCLE THE NUMBERS
1					1 2 3 4 5 6 7 8 9 10 11
2					1 2 3 4 5 6 7 8 9 10 11
3					1 2 3 4 5 6 7 8 9 10 11
4					1 2 3 4 5 6 7 8 9 10 11
5					1 2 3 4 5 6 7 8 9 10 11
6					1 2 3 4 5 6 7 8 9 10 11
7					1 2 3 4 5 6 7 8 9 10 11
8					1 2 3 4 5 6 7 8 9 10 11
9					1 2 3 4 5 6 7 8 9 10 11
10					1 2 3 4 5 6 7 8 9 10 11
Name of Dual Events (Men)			Athlete's Name		
Name of Dual Events (Women)			Athlete's Name		

(Stands for: 1=Changquan, 2=Jianshu, 3=Daoshu, 4=Qiangshu, 5=Gunshu, 6=Taijiquan, 7=Taijijian, 8=Nanquan, 9=Nandao, 10=Nangun, 11=Dual Events)

Note: This form must be returned to the Organizing Committee of the 10th World Wushu Championships by mail or fax no later than 24:00 (Local Time), **September 20, 2009.**

Flight Details:

Arrival:

Date: _____

Time: _____

Flight No. _____

Departure:

Date: _____

Time: _____

Flight No. _____

 Signature of President/Secretary General (With Federation Seal)

 Date

10th World Wushu Championships

Final Entry Form

(Sanshou Competition)

Federation _____

Team Manager _____

Team Coach _____

Team Doctor _____

Team Judge _____

Observers _____

Competitors (All names in capital letters. Please underline the surname.)

NO.	ATHLETE'S NAME (IN ENGLISH)	ATHLETE'S NAME (IN CHINESE)	SEX	AGE	CATEGORY
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Note:

This form must be returned to the Organizing Committee of the 10th World Wushu Championships by mail or fax no later than 24:00 (Local Time), **September 20, 2009**.

Flight Details:

Arrival:

Departure:

Date: _____

Date: _____

Time: _____

Time: _____

Flight No. _____

Flight No. _____

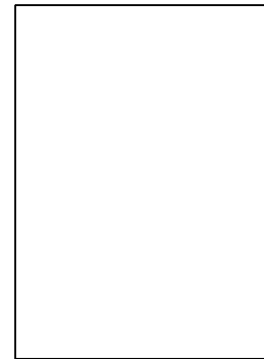
Signature of President/Secretary General (With Federation Seal)

Date

The 10th World Wushu Championships

WAIVER OF LIABILITIES

Federation _____
Name of Participant _____
Date of Birth _____
Nationality _____
Sex _____
Passport No. _____
Status _____



* Athlete * Team Manager * Coach * Doctor * Observer

I, _____ the undersigned, knowingly and without duress, do voluntarily submit my Entry to the 10th World Wushu Championships. In consideration of Confederation of Canadian Wushu Organizations accepting my application, I hereby assume all risk of physical and mental injuries, disabilities and losses which may result from or in connection with my participation in the 10th World Wushu Championships. The 10th World Wushu Championships is hosted by International Wushu Federation (IWUF) and organized by Wushu Canada/Wushu Ontario, hereafter IWUF and Wushu Canada/Wushu Ontario collectively refer as "Organizing Committee", acting for myself, heirs, personal officers, agents, representatives and assignees, I do hereby release the Organizing Committee, its officers, agents, representatives, volunteers, and other related members from all claims, actions, suits, and controversies at law or in equity by reason of any matter, cause or thing whatsoever that I may sustain as a result of or in connection with my participation in the 10th World Wushu Championships. I fully understand that all medical attention or treatment afforded to me by the Organizing Committee its officers, representatives, volunteers, and all other related members will be of the first aid only, and hereby release the Organizing Committee its officers, representatives, volunteers, and all other related members from any liability for such aid. I understand it is my obligation to obtain medical coverage.

I agree to abide by and follow the Rules established by the Organizing Committee, and I understand that my protest must be conducted in accordance with the rules of Arbitration.

I agree that my performance, attendance, and participation at the 10th World Wushu Championships may be filmed or otherwise recorded or released or telecast live. I consent to allow the Organizing Committee use of my name, address, voices, poses, pictures and biographical data concerning full or parts, in any form or language, with or without other material, throughout the world, without limitation, for television, radio, video, theatrical medium picture, or any other medium by any devices now known or hereafter devised and I do hereby Waive any compensation in regard thereof as well as any future rights to the aforementioned.

I have read and fully understand the waiver listed above.

(Signature of Parent or Legal Guardian is required if participant is under 18)

Signature of Participant

Signature of Parent/Guardian

Date

The 10th World Wushu Championships
October 23 – 30, 2009 Toronto, Canada
Preliminary Application Form for Hospitality

Federation _____
Address _____
Telephone No. _____
Facsimile No. _____
Contact Person _____

Room Details:

Total Number of Rooms Requested _____
Total Days of Lodging _____
Number of Male Participants _____
Number of Female Participants _____

Signature of President/Secretary General (With Federation Seal)

Date

This form must be returned to the Organizing Committee of the 10th World Wushu Championships no later than 24:00 (Local Time) on August 10, 2009.

Address:

2370 Midland Avenue, Unit B22
Scarborough, Ontario M1S 5C6 Canada
Tel: +1 4163215913
Fax: +1 4163215068
Email: 10thWWC@wushucanada.com

The 10th World Wushu Championships
October 23 – 30, 2009 Toronto, Canada
Final Application Form for Hospitality

Federation _____
 Address _____
 Telephone No. _____
 Facsimile No. _____
 Contact Person _____

Room Details:

Room (s) Required	Name of Applicant(s)	Date of Birth	Passport No.	Citizenship	Arrival Date	Departure Date	Total Days	Total Amount
1	a) b)							
2	a) b)							
3	a) b)							
4	a) b)							
5	a) b)							
Total: USD								

Bank Account:

A/C No. 10332-004-0663-730472645

Banker: TD Canada Trust

Address: 3477 Sheppard Ave. East, Scarborough, Ontario, Canada M1T 3K6

Phone no.: (416)291-9566

SWIFT code: TDOMCATTOR

 Signature of President/Secretary General (With Federation Seal)

 Date

This form must be returned to the Organizing Committee of the 10th World Wushu Championships no later than 24:00 (Local Time) on September 20, 2009.

Address:

2370 Midland Avenue, Unit B22

Scarborough, Ontario M1S 5C6 Canada

Tel: +1 4163215913

Fax: +1 4163215068

Email: 10thWWC@wushucanada.com

The 10th World Wushu Championships
October 23 – 30, 2009 Toronto, Canada
Final Application Form for Hospitality

Federation _____
 Address _____
 Telephone No. _____
 Facsimile No. _____
 Contact Person _____

Room Details:

Room (s) Required	Name of Applicant(s)	Date of Birth	Passport No.	Citizenship	Arrival Date	Departure Date	Total Days	Total Amount
6	a) b)							
7	a) b)							
8	a) b)							
9	a) b)							
10	a) b)							
Total: USD								

Bank Account:

A/C No. 10332-004-0663-730472645

Banker: TD Canada Trust

Address: 3477 Sheppard Ave. East, Scarborough, Ontario, Canada M1T 3K6

Phone no.: (416)291-9566

SWIFT code: TDOMCATTOR

 Signature of President/Secretary General (With Federation Seal) _____
Date

This form must be returned to the Organizing Committee of the 10th World Wushu Championships no later than 24:00 (Local Time) on September 20, 2009.

Address: 2370 Midland Avenue, Unit B22
 Scarborough, Ontario M1S 5C6 Canada
 Tel: +1 4163215913
 Fax: +1 4163215068
 Email: 10thWWC@wushucanada.com