

**2024 US Challenge**  
**Padded Weapon Division Registration**  
**Registration Deadline and Postmark by June 30, 2024**

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

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

Cell phone: \_\_\_\_\_

Year of Birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

School/Club Name: \_\_\_\_\_

City, State, Country: \_\_\_\_\_

T Shirt Adult Size: Small \_\_\_\_\_ Medium\_\_ Large\_\_ X Large \_\_\_\_\_

T-Shirt Youth Size: Small \_\_\_\_\_ Medium\_\_ Large\_\_

Padded Weapon Age Group: You can ONLY select one age group

\_\_\_\_\_ Padded Weapon Children Born from 2015-2018

\_\_\_\_\_ Padded Weapon Teen Born from 2010-2014

\_\_\_\_\_ Padded Weapon Adult Born from 1975-2009

\_\_\_\_\_ Padded Weapon Senior Born from 1965-1974

\_\_\_\_\_ Padded Weapon Elder Born from 1964 and earlier

Children, Teen, Senior, and Elder Divisions are limited to **4** athletes.

These Divisions use a round robin system and will produce one winner based on total score with rounds won worth 3 points and ties worth 1 point.

Overall ties are broken by the number of points scored in a round.

The Adult Division is limited to **16** athletes.

This Division is split into 4 groups and uses a round robin system to produce the winner of the group. The second level is by elimination.

The third level is the fight for the championship.

## United States Challenge Event Liability Waiver

I, knowingly and voluntarily, submit my registration to the 2024 United States Challenge Championship. I am fully aware of my personal health and any medical conditions that I have and, hereby, certify that I am physically and mentally capable of participating in the events that I have registered for. I agree to comply with all the rules of the events. I am fully responsible for my actions and will assume all risks associated and/or resulting from participation at this event. To complete my registration, I, hereby, release the organizers and their affiliates (including officers, agents, representatives, employees, volunteers, etc.) from any liability due to any injuries incurred before, during, and / or after the event. Further, I will hold harmless and will waive my rights to file any legal claims, class actions, suits, or controversies against the organizers and their affiliates, specifically: United States Wushu Academy, Center for Cultural Exchange, United States Health Qigong Association, Tiger Claw, World Swordsmen Federation, and Washington Education Zone. In agreeing to the event terms and conditions, I am also waiving my rights to have any personal representatives file liability and/or legal claims against the organizers and their affiliates.

In addition, I, hereby, waive any claims to compensation for the use of videos, photographs, media coverage (including social media), interviews, personal statements, etc. that may have been obtained by the organizers during the event or previous related events.

**Note:** If the participant is under the age of 18, the accompanying personal representative also agrees to the terms and conditions of this event in conjunction with the participant's agreement.

### Event Refunds

As the participant and/or the participant's personal representative, I understand that there are NO REFUNDS issued for this event if the participant misses any events. Event refunds will only be issued if the organizers cancel the event.

### Terms and Conditions

I have read and accept the Liability Waiver and Refund Terms.

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Participant Print Name and Signature (Required)

Date

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Parent/Guardian for under 18 years old participants, Print name and Signature (Required) Date

**April Registration Fee for Padded Weapon Division:  
Post Marked Between April 2, 2024 and April 30, 2024**

Padded Weapon event \$50 \_\_\_\_\_

**May Registration Fee for Padded Weapon Division:  
Post Marked Between May 1, 2024 and May 31, 2024**

Padded Weapon event \$60 \_\_\_\_\_

**June Registration Fee for Padded Weapon Division:  
Post Marked Between June 1, 2024 and June 30, 2024**

Padded Weapon event \$60 \_\_\_\_\_

Please send signed registration form and check payable to

“United States Wushu Academy”  
1136 West Broad Street, Falls Church, VA 22046

Phone 703-698-8182  
Email: [uswa.staff@gmail.com](mailto:uswa.staff@gmail.com)