2026 NTI SPRING CHAMPIONSHIP

www.ntikicks.net

FORM
BREAKING
SPARRING
SWORD SPARRING
TEAM FORM
WEAPON
MUSICAL FORM/WEAPON

Two $250 Cash Drawings
for Schools with 15 or more
Pre-Registered Students.

2 Kicking Bags Drawings
for All Pre-Registered
Competitors

SAT, APRIL, 25TH

OWATONNA MIDDLE SCHOOL
500 15TH ST. NE./ Owatonna Mn

No Refund For Any Reason

Discounted Entry Fees: (must pre register by APR 19TH)

Individual Discount: $49/1 event/ $5 for each additional event.

1st timer discount: $45/1event/ $5 for each additional event

Family Discount: $145 for 4 or more family member
(include 1 event per person/$5 for each additional event)

Entry Fee(at the door): $59/1event/ $5 for each additional event
$159 for 4 or more family member(1 event per person $5 for each extra event)

Spectator Fee: Age 6 & up $5.00 Family $13 Under 5 Free

Please send your check and Form to:
212 W. Bridge St.
Owatonna/ Mn/55060

Registration Time:8:30-10am
Starting Time: 10am
Ending Time: Around 4pm

Form	Name:	Age:	Sex:	School:
Breaking	Name:	Age:	Sex:	School:
Team Form	Name:	Age:	Sex:	School:
Weapon	Name:	Age:	Sex:	School:
Sparring	Name:	Age:	Sex:	School:
Sword Sparring	Name:	Age:	Sex:	School:
Musical Form/ Weapon	Name:	Age:	Sex:	School:

2026 NTI SPRING Championship Registration Form(Please Print)

Name:..... Age:..... Sex:..... Rank:.....Tel:.....

Address:..... City:..... State:.....Zip:.....

Martial Arts School:.....Instructor:.....School's Tel#:.....

Martial Arts School's Address:.....City:.....State:.....Zip:.....

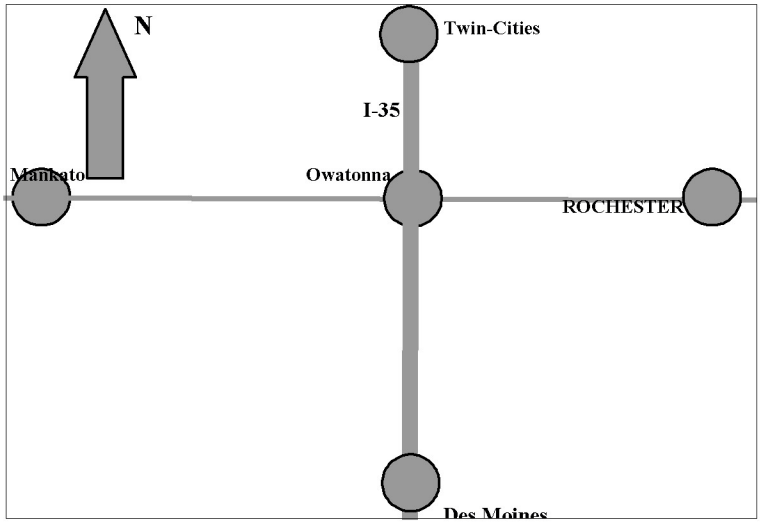
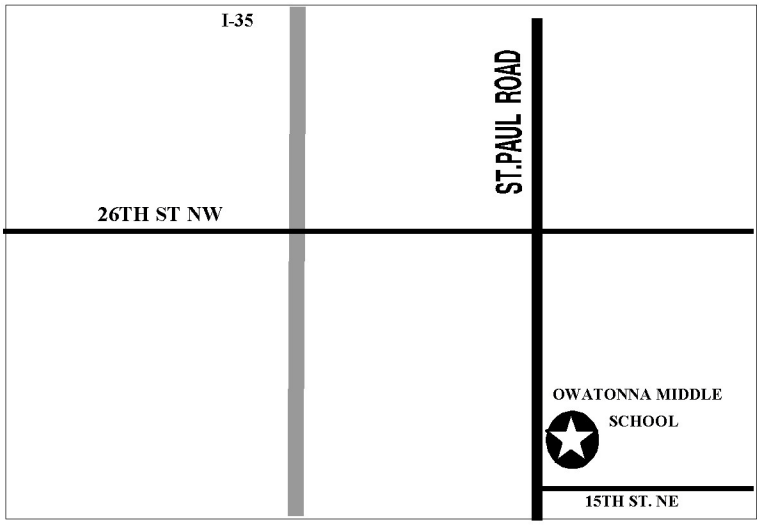
E-Mail:.....

Release of all Claims and Assumption of liability

I intend to be legally bound for myself, my heirs, executors and all my administrators waive, release and forever discharge any and all claims for damages which may have or hereafter occur to me against the National Taekwondo Inst.'s "2026 NTI SPRING Championship" committee or their respective officers, agent representatives, successors and or assigned for any and all damages which may be sustained and suffered by me in connection with my association with, or which arise out of my participation in this athletic meet. This release is made for the event being held on 25th day of APRIL, in the year 2026, at OWATONNA MIDDLE SCHOOL , in Owatonna mn.

Name:(please print)".....Sign:.....

Name of Parent/Guardian:.....Sign:.....Date:.....

Please send Registration Form & check to:

Tournament HQ: 212 W. Bridge St.
Owatonna/ Mn/55060
(507)456-0550