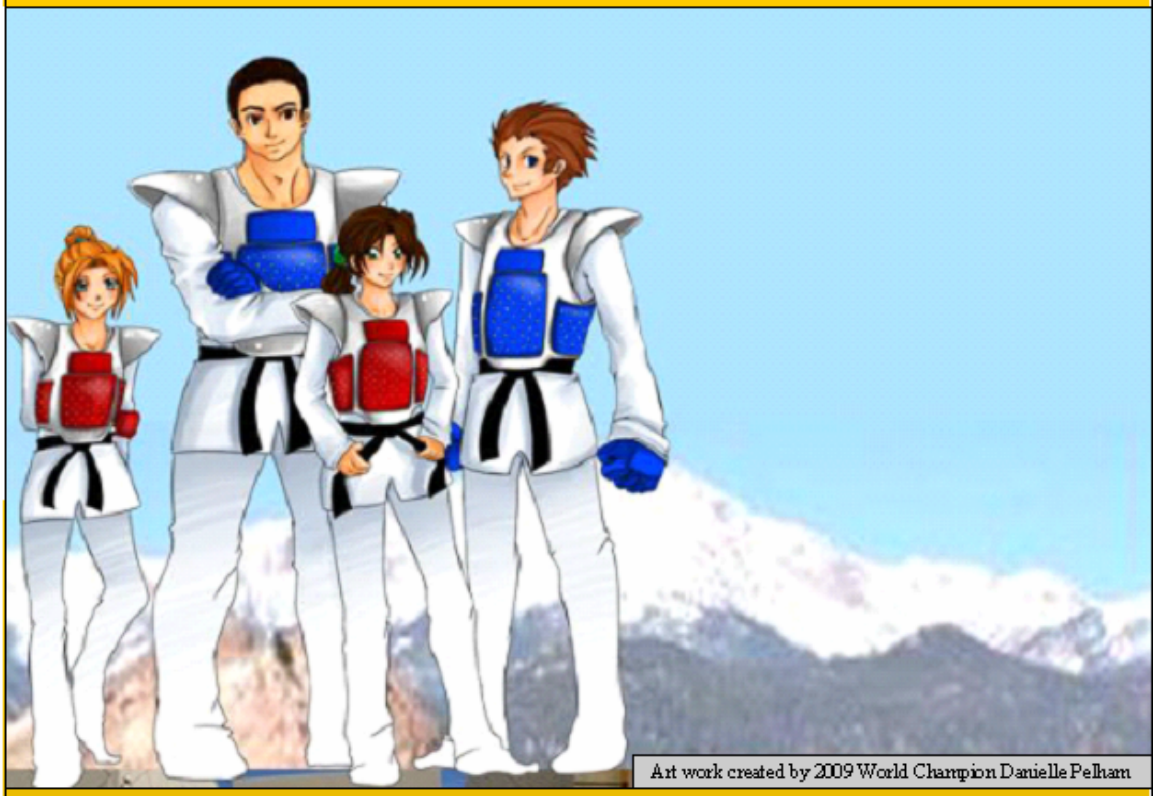
USA TAEKWONDO

TAKE YOUR SKILLS TO A HIGHER LEVEL!



Art work created by 2009 World Champion Danielle Pelham

2010 ATHLETE DEVELOPMENT CAMP

Where: U.S. OLYMPIC TRAINING CENTER, COLORADO SPRINGS
When: AUGUST 11th —15th (Arrive Aug. 10th, Depart Aug. 15th)

Training sessions will be conducted by the USAT National team coaching staff, led by U.S. Olympic Coach, Jean Lopez

RECEIVE WORLD CLASS INSTRUCTION AT A WORLD CLASS TRAININGFACILITY!

TO ENSURE AN OPTIMAL TRAINING AND LEARNING ENVIRONMENT, SPACE IS LIMITED, SO REGISTER NOW!!!
SEE INSIDE FOR MORE DETAILS...

USA

Member U.S. Olympic Committee

2010 USA TAEKWONDO ATHLETE DEVELOPMENT CAMP

PROGRAM DESCRIPTION AND INFORMATION

USA Taekwondo is offering an Athlete Development Camp for Olympic-style Taekwondo. The Athlete Development Camp is a five-day training camp taking place at the United States Olympic Training Center to provide athletes with the optimal conditions to refine and improve their Taekwondo skills and knowledge. The camp will integrate the technical and tactical components of sport Taekwondo along with the principles of sports science to enhance the performance of its participants.

The *USA Taekwondo* Athlete Development Camp is a chance for athletes to work with and learn from some of the best Taekwondo coaches in the world. The training sessions will be conducted by a talented team of Olympic, World, and National caliber level coaches who have a proven record of success as Taekwondo athletes and as coaches. Participants will receive instruction in some of the training protocols that are utilized by the U.S. National Teams.

The camp is scheduled to take place from August 10th to August 15th. Participants should plan on arriving into Colorado Springs (COS) on Tuesday evening, August 10th and departing for home on Sunday morning, August 15th.

In order to provide the best training and learning environment possible, the camp is limited to 60 participants on a first come, first served basis. So apply now to ensure your spot for this special experience!

The cost to train with and learn from national and international champions for this one-week training program is $595.00, if registration is completed by July 30, 2010. The cost of the camp will be $645.00 after July 30, 2010. The camp registration fee covers World Class Taekwondo instruction as well as room and board at the U.S. Olympic Training Center.

Athletes must be current members of USA Taekwondo and be 12 years old or older to participate.

The *USA Taekwondo Athlete Development Camp* is a wonderful opportunity to learn and grow in your journey as an athlete and student of Olympic-style Taekwondo!

"The Athlete Development Camp is not only a good way to learn new things about the sport, but is a good place to test your skills in a positive environment!"

- Seth Wolfe, Bronze medal at the 2010 Jr. World Championships participant of 2008 USAT Athlete Development Camp

TAKE YOUR SKILLS TO NEW HEIGHTS!

ATHLETE DEVELOPMENT CAMP APPLICATION

CAMP DATES: AUGUST 10 - 15, 2010

First Name: _____ **Last Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Cell:** _____

Email: _____

Date of Birth: _____ **Age:** _____ **Gender:** **M** **F**

Resident Status (**Please circle one)** U.S. Citizen U.S. Resident Other. If other, _____ (Please list)

USAT Membership #: _____ **TKD Belt Rank:** _____ (Color)

All participants must be current USAT members, must be 12 years old or older (to comply with OTC housing policies), and provide payment of the camp registration fee in order to participate.

By signing this form, I acknowledge that I understand and accept the terms and conditions for participating in the USAT Athlete Development Camp.

Signature: _____ **Date:** _____

Camp Fee: **Early registration - $595.00 if payment is made by July 27, 2010.**
Late registration - $645.00 if payment is made after August 3, 2010.
(Please make cashier's check/money order payable to USA Taekwondo)

Please check Payment Type ***(Personal and Business checks can not be accepted)***.

___ Cashier's Check/Money Order ___ Visa ___ MasterCard ___ Discover ___ AMEX

Credit Card #: _____ Expiration Date: _____ Security Code: _____

Print Name of Card Holder: _____ Zip Code of Card Holder: _____

Signature of Card Holder: _____

Please submit this application, along with b.) the USAT Code of Conduct, c.) Medical Consent Form, d.) Waiver and Release of Liability Form, and e.) payment either by fax at (719) 866-4642 or by mail to the following address:

USA Taekwondo • 2010 Athlete Development Camp • One Olympic Plaza
Suite 104C • Colorado Springs, CO 80909

USA TAEKWONDO – ATHLETE CODE OF CONDUCT

The following outline is the Code of Conduct for USA Taekwondo (USAT). The Code is for all athletes, coaches, and staff members to fully abide by when participating in any and all USA Taekwondo athlete development camps. Failure to comply with the following guidelines can result in the removal from an athlete development camp, dismissal from future USAT athlete development camps, and/or the complete suspension from participation as an athlete, coach, or staff member in future USAT athlete development camps.

1. One will act in a manner consistent with the spirit of fair play and responsible conduct.
2. One will acknowledge, respect and adhere to the authority of USA Taekwondo appointed athlete development camp staff if necessary.
3. One will fully comply with USA Taekwondo (USAT) uniform requirements.
4. One will maintain an appropriate level of fitness to promote optimal athletic performance.
5. One will refrain from the excessive use of performance-limiting drugs, including, but not limited to, tobacco and alcohol.
6. One will refrain from using any substance on the Olympic Movement Anti-Doping Code, as enforced by USADA.
7. One will abide by the policies and rules established by USAT and the USOC.
8. One will respect others, including coaches, other athletes, officials, and spectators.
9. One will not engage in, nor tolerate, any form of verbal, physical or sexual abuse toward coaches, other athletes, officials, and spectators.
10. One will respect the property of others.
11. One will refrain from illegal or inappropriate behavior that would deter from a positive image of oneself and USA Taekwondo.
12. One will maintain a positive attitude and act in a way that will bring honor to oneself, the staff, the sport of Taekwondo, USA Taekwondo and the United States of America.
13. One will remember that I am an ambassador of USA Taekwondo, my country and the Olympic movement.

USA Taekwondo recognizes that this Code does not establish a comprehensive set of rules that prescribes to every aspect of appropriate behavior.

_____	_____	_____
Participant's Printed Name	Participant's Signature	Date
_____	_____	_____
Parent/Guardian's Printed Name	Parent/Guardian Signature	Date

2010 USAT ATHLETE DEVELOPMENT CAMP

USA TAEKWONDO CONSENT FOR MEDICAL TREATMENT - ATHLETE

I, _____, consent to medical treatment for athletic related injuries/illnesses by USA TAEKWONDO Medical Personnel and/or Hospital Medical Staff. I authorize treatment by such personnel in the event of injury or illness.

_____ _____
(Athlete's Signature) (Date)

As a parent or legal guardian of _____, who is under the age of 18, I hereby authorize medical treatment in the event of an injury or illness while he/she is participating in a USA TAEKWONDO athlete development camp by a member of the USA TAEKWONDO Medical Personnel and/or Hospital Medical Staff.

_____ _____
(Parent/Guardian Signature) (Date)

All medical evaluations completed by USA TAEKWONDO Medical Personnel for athletic injuries are considered confidential and will be filed at the USA TAEKWONDO National office. Copies of medical injury forms can be requested verbally from the USA TAEKWONDO Medical Coordinator by the injured athlete or parent of a minor athlete at the time of injury or requested in writing following the athlete development camp. The original injury report form will remain on file at the USA TAEKWONDO National Office. No information about an individual athlete will be released without that athlete's permission. Information pertaining to injury data without using an athlete's name will be released to the Medical Director, the Medical Coordinator, or their assistants for purposes of injury research or recommendations for safety rule changes only. An athlete's name and injury will only be released in cases pertaining to head injures requiring the athlete to not compete for 30 days per USA Taekwondo and World Taekwondo Federation rules. This information will be released to the Medical Director, Medical Coordinator, Referee Chairperson, Events Specialists, National Events Director, Chief Executive Officer, and/or Executive Committee for purposes of enforcing the 30-day-out rule in compliance with USA TAEKWONDO and WTF rules. I have read and understand the above information as it pertains to my medical records of injury or illness which may occur and be treated at USA Taekwondo athlete development camps.

_____ _____ _____
(Athlete's Signature) (Parent/Guardian Signature) (Date)

INSURANCE INFORMATION:

Primary Insurance Company: _____

Insurance Address: _____

Insurance Phone Number: _____ Policy #: _____

Claimant's Name (Please print): _____

WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND PARENTAL CONSENT AND INDEMNITY AGREEMENT

• In consideration of your acceptance of my entry or that of the minor child, I do hereby, for myself or the minor child, my heirs, executors and administrators waive, release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless any and all rights and claims for damages which I may have or may accrue to me against USA Taekwondo and for its states and district associations, this athletic program, its organizing committee, the United States Olympic Committee, the 2010 USAT Athlete Development Camp, the World Taekwondo Federation, and all members of this athlete development camp, or their respective officers, committees, medical committee, agents, representatives, successors, sponsors, advertisers, volunteers, owners and lesser of premises on which the camp takes place, assignees and against any participant for any and all damages which may be sustained by me or the minor child, in connection with my association with or entry in the above athlete development camp, or which may arise out of traveling to, participating in, and returning from this athlete development camp. I understand that all entry fees are nonrefundable.

• I understand the nature of USA Taekwondo activities and believe that my experience and capabilities, or that of the minor child, to be qualified to participate in this athlete development camp. I understand that USA Taekwondo activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and death. These risks and dangers may be caused by myself or the minor child's own actions, or inactions, and/or the actions or inactions of others participating in the athletic program.

• If the minor child or I are selected, I agree to be drug tested pursuant to the United States Olympic Committee National Anti-Doping Program, as amended. I understand that such drug testing may take place at any time during the event. If the minor child or I fail to show up at the athlete development camp, for any reason, I knowingly forfeit this camp and all applicable registration fees. I further understand that any pictures taken of the minor child or myself in connection with this athlete development camp may be used by USA Taekwondo for publicity or promotion without compensation.

• I have read this agreement, fully understand its terms, understand that I or the minor child have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by the law and agree that if any portion of this agreement is held to be invalid that the balance, notwithstanding, shall continue in full force and effect.

_____	_____	_____
Participant's Printed Name	Participant's Signature	Date
_____	_____	_____
Parent/Guardian's Printed Name	Parent/Guardian Signature	Date