



## World Tour Entry Form

Name of Athlete: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Weight Division: \_\_\_\_\_ Rank: \_\_\_\_\_

Membership Expiration Date: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Personal Coach of Record: \_\_\_\_\_

### World Tour Events:

### Camp (if applicable):

1. \_\_\_\_\_

Yes  No

2. \_\_\_\_\_

Yes  No

3. \_\_\_\_\_

Yes  No

4. \_\_\_\_\_

Yes  No

5. \_\_\_\_\_

Yes  No

6. \_\_\_\_\_

Yes  No

Name as printed on credit card: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Sec. Code \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Credit Card Billing Zip Code: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

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