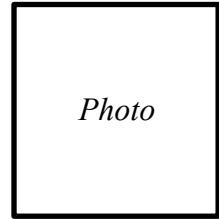


Seung Fu Martial Arts

Registration Form

Personal Information

First Name:
Last Name:
Birthdate:
Birthplace:
Gender: Man Woman
Education:
Occupation:



Contact Information

Address:
Postal Code/City:
Telephone Number:
Email Address:

Previous Martial Arts Experience? Yes No

Style:
Level Achieved:
How long training:
Location:

How did you learn about Seung Fu Martial Arts? _____

Are there any physical conditions which may prevent you from training?

No Yes If yes, what _____

Are there any circumstances which might prevent you from training regularly?

No Yes If yes, what _____

Are there any circumstances which the instructor should know about which might hinder training?

No Yes If yes, what _____

I, the undersigned, do hereby voluntarily submit my application for admission to Seung Fu Martial Arts for attendance and participation in lessons.

Furthermore, I do hereby assume full responsibility for any and all damages, injuries, or losses that I may sustain or incur, if any, while participating in any activity at or for Seung Fu Martial Arts and waive all claims against the instructors and/or fellow students of said classes, and the owner of the building, for any injuries which I may sustain in the course of activities at or for Seung Fu Martial Arts.

Furthermore, I voluntarily consent that any picture furnished by me or any pictures taken of me in connection with Seung Fu Martial Arts may be used for publicity and/or promotion and waive the right to any compensation in regard thereto.

I understand that there are NO REFUNDS for any fees or tuition paid by me for the classes at Seung Fu Martial Arts, unless the classes are cancelled. I also realize that I am responsible for payment in a regular and timely manner and must inform Seung Fu Martial Arts of intent to discontinue training one month in advance or subscription will continue and no refund will be provided.

Signature: _____

Date: _____

If student is under the age of 18, signature of parent or guardian is required.

Full Name of Parent/Guardian: _____

Date: _____

Signature of Parent/Guardian: _____