



# REGISTRATION SHEET

<i>This Box for Office Use</i>	
1st pmt \$_____ / / reg pmt \$_____ met: iv ach cc dd: _____	
book _____ equipment _____ belt size _____ class _____	
gup _____ days _____ pr? _____ ps _____ db _____ email _____ c list _____ txt _____	

Program: Regular PK TC HKD Krav & FAST LCSD course \_\_\_\_\_ Trial \_\_\_\_\_ Oth \_\_\_\_\_

Date: \_\_\_\_\_ Fill out this information for the person who will attend the classes:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Circle One: Male Female

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Phone(s): \_\_\_\_\_ Text # \_\_\_\_\_

(We send a Friday text reminder of our weekend events and uniform for the next week.)

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Self or Parents): email \_\_\_\_\_ occupation: \_\_\_\_\_

If Child: Names of Parents \_\_\_\_\_

Medical conditions (of student) that we should know about: \_\_\_\_\_

## How did you hear about us? (Phone book, facebook, friend, demo, driving by?)

If you heard about us from a friend, be sure to list their name so they get a reward!

Do you remember ever seeing an advertisement from us? If so, where \_\_\_\_\_

## What are the benefits you want from your membership here?

(Physical fitness, self defense, confidence, peace of mind, improved grades?) List as many as you want!

## Please read the following paragraphs and sign to indicate that you understand them.

The student herein acknowledges that the classes, practice, and contests of martial art and/or self defense training involve strenuous physical and mental exertion. And, the student hereby represents that he/she is physically and mentally fit to take the course of instruction.

The student also recognizes that these lessons and instructions involve physical contact with the instructor and other members which may result in physical injury. The undersigned individually and for his/her successors, heirs, executors, administrators, and assigns, expressly assumes all hazards and risk of injury resulting either directly or indirectly from the lessons and contests of their martial art class.

The student also agrees that **no claim for refund** of any amount may be made by reason of his/her absence or withdrawal from Gold Medal Taekwondo.

Student Signature \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

**Initial that you are notified of the following \_\_\_\_\_**

We reserve the right to use **pictures & videos** of all students as decoration in the facility, on the internet (YouTube, website, Facebook) and in other advertising. We will not use your name with picture/video without your permission. Discuss any concern you have with this with Master Shoberg.