

For Office Use Only
<input type="checkbox"/> CARD
<input type="checkbox"/> VOICE
<input type="checkbox"/> REG FEE
<input type="checkbox"/> EXCEL
<input type="checkbox"/> BIRTHDAY
<input type="checkbox"/> ATA
UNIFORM SIZE: _____



ATA STUDENT
 OTHER: _____

Student Name: _____ Birthdate: _____

Age: _____ M/F: _____ How did you hear of us: websight-yellow pages-friend-other's _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Email/website: _____

Mother: _____ Cell/ Work # _____

Father: _____ Cell/ Work # _____

Contact in case of emergency: _____ Contact's Ph: _____
Other than Parent(s)

Relationship: _____

Health Concerns: _____

Previous Martial Arts: _____

Legal Disclaimer

The enrollee is aware in making this agreement to participate in training in the martial arts that certain elements of this training are physically demanding and potentially dangerous, and with this knowledge agrees to indemnify and hold harmless from all losses caused by accident or injury the Instructor, his assistants, or any third parties who may be enrollees of the same class or seminar or who are students with the Instructor, in the event that the enrollee or the said third party is injured in any way during the proper performance and execution of techniques or instruction provided in this training.

This release shall also include any landlord or leaseholder of any training facility in which training is conducted. I also agree that the terms hereof shall serve as a release and assumption of risk for my heirs, executors and administrators, and for all members of my family, including any minors.

The enrollee attests that he/she is in good physical condition and has no known or suspected medical conditions that would preclude vigorous physical activity. *(It is recommended that participants have a checkup by a physician before beginning any new physical regimen.)*

It is further agreed that the enrollee's name, photograph or other representation for the purposes of promotion or publicity for this martial art program or the instructor may be used.

As part of the consideration for participation, the enrollee acknowledges and assumes all these risks and wishes to enroll in this course of instruction.

*Signature: _____ Date: _____

Print Name: _____

*Parent or legal guardian must sign for all persons under 18 years of age.