Takeout your Smart phones!
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Birthday Party Attendee Information Sheet

Personal Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Home Phone: _____ Cell Phone: _____

Email Address _____

Birth Date ____/____/____

Have you studied the martial arts before? **YES or NO**
If YES,
Explain_____

Do you have any physical conditions, including surgery, which may affect you physically **YES or NO**
If YES,
Explain_____

Being duly aware of the risks and hazards inherent in activates related to the martial arts and kickboxing. I/we hereby elect voluntarily to participate in said activities. I/we assume all risks of loss, damage or injury that I/we may sustain while participating in the aforementioned activities. I/we hereby release Karate World and all persons concern with said activities from any and all claims, demands and causes of action on action of injury, which may occur from participation in said activities. I understand my responsibilities as a student of Karate World. I have been notified of my payment arrangements, parking policies, dojo rules, and code of conduct. I have completed this form honestly and completely to the best of my knowledge.

_____ _____
Student's Signature (or Parent's if under 18) Date

(For office use only)
Thai Cardio KHN TKD Trial birthday party date_____
Basic Master Club/Black Belt Club

(start date)_____ Card:_____ Uniform_____Gloves_____ Computer/Filed_____

After 1st class did they sign up for Quick Start_____ or _____12 month _____6month membership