

MARTIAL ARTS FOR EDUCATION REGISTRATION FORM

Student's first Name	Last	Middle	Grade	Birth date mm / dd / yyyy
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Address (mailing)	School
City	Zip
email	

How did you hear about us?
School flyer / Web / Friend / Family / signboard / Building / other:

Parent/Guardian Name	Parent/Guardian Name
Relation to Child	Relation to Child
Home Phone #	Home Phone #
Work Phone #	Work Phone #
Pager/Cell or Other #	Pager/Cell or Other #
Employer	Employer
Which parent(s)/guardian should we contact about special events, questions, etc.?	

RELEASE OF LIABILITY

I wish my child to participate in Budo-Taijutsu training opportunities such as weekly classes, special training seminars and other formal and informal instruction. I hereby represent that he/she is physically and emotionally fit to engage in martial arts instructional training. I also acknowledge that the Sponsors are under no obligation to require me to prove his/her degree of health and fitness. Sponsors will refer to all those officially involved in the training event, providing facilities, instructional support, explicit or implicit endorsement, etc., such as Martial Arts for Education, Rio Rancho Public Schools, and all their staff, agents, representatives, owners, operators, administrators, volunteers, etc.

By signing this agreement, it is my stated intention to knowingly assume all risks involved in participating in or attending such training, and to release the Sponsors from any responsibilities or liability for any injury my child may sustain while involved in said training. I understand and agree that the Sponsors will not be held liable for any injuries, damages, etc., caused by or resulting from negligence of the Sponsors and I covenant not to sue, and waive and release Sponsors from any responsibility of personal injury to my child.

Applicant's (Student's) Printed Name: _____

Signature of Parent/Legal Guardian: _____

Date: / /

FOR OFFICE USE

- \$ 30.00 - Yearly Registration Fee
- \$ 40.00 - Monthly Fee: for 1 class per week
- \$ 60.00 - Monthly Fee: for unlimited classes

kyu	start date	reg fee pd	fee amt	program	data base

Return completed form with registration fee and monthly fee

MARTIAL ARTS FOR EDUCATION

P. O. Box 61 c/o Robert Mattson San Ysidro, NM 87053
Contact (Call/Text) : 505-350-6318