

# Karatedo Registration Form

9333 Santa Barbara Road  
Atascadero CA 93422 (805) 466-9505

Name:		Age:	Gender: M    F
Address:			
Telephone #:		E-mail:	
Previous Karate Experience:	If you marked YES then please explain what style and your belt rank:		
No: <input type="checkbox"/> Yes: <input type="checkbox"/>			
Circle all that apply -			
Plan to take: Karate      Arnis      Both		On days: Monday      Wednesday      Both	
Emergency Contact: _____ Relationship: _____			
Phone number: _____ Other: _____			
Any special needs or information we should know about participant:			

**Make checks payable:**  
Dove Creek Church

I have carefully considered the benefits that I/they will derive from such Karatedo activity/ies/class and such. I shall not hold my/their teachers, coordinators or church administrators responsible for any incident which may happen to me/them beyond my/their control, because I am aware that I/they will do all necessary health and safety precautions to safeguard me/them. Permission is given to photograph or video my/their participation for future promotions without compensation whatsoever. I have read and understand the basic rules and regulations of this event and will hereby abide by them. I hereby certify that the information contained on this form is correct and accurate to the best of my knowledge.

Signed (guardian if under 18): X \_\_\_\_\_ Date: \_\_\_\_\_