



Spruce Grove Karate Registration Form

Student's Full Name	Date of Birth (dd/mm/yyyy)	Book Number (If Returning Student)	Current Rank (White if New Student)

Address: _____

E-mail: _____ Phone Number: _____

How did you find out about SG Karate?

A Friend Poster Trade Show School Newsletter Website Other _____

Uniform Size(s): _____ Uniform Prices: Size 000-0 - \$40, Size 1-3 - \$45, Size 4-6 - \$50

Session Fees:	<i>(There are 3 sessions per year: September-December, January-March, April-June)</i>		
<input type="checkbox"/> Just for Kicks (ages 5-7)	\$125	<input type="checkbox"/> Adult	\$150
<input type="checkbox"/> Junior (ages 8-12)	\$135	<input type="checkbox"/> Family	\$205
<input type="checkbox"/> Student (ages 13+)	\$145	<input type="checkbox"/> Additional SWKKF Membership*	\$70 x _____ = \$ _____
*SWKKF membership fees are included in all individual session fees, and cover the first two family members for family session fees. Additional family members are \$70/year.			

Total Paid: \$ _____ Cash Cheque

Please Note: Before committing, you are welcome to join us for up to 2 classes to help you decide if our program will meet your expectations. These classes are not free but will be included in your session fees if you decide to join. Because of this, no refunds will be given for any unused portion of a session.

Waiver

I, the undersigned, realize that as with any sport, there is some risk to myself or my child taking part in all karate-related activities. These risks may include, but are not limited to bruises, cuts, broken bones, concussion and even death. I understand these risks and I assume all responsibility and hold harmless Spruce Grove Wado-Kai Karate, Iwa Yama Karate and the Shintani Wado-Kai Karate Federation, it's instructors, officers and agents any anyone else involved for any losses, damages, injuries and deaths that may occur as a result of myself or my child(ren) taking part.

***** I also agree to allow images of myself and/or my child(ren) to be used in print or electronically to promote the club. eg. Website or advertising. _____ (Please Initial to Consent)

Participant or Guardian Name (print): _____ Signature: _____

Participant or Guardian Name (print): _____ Signature: _____

Participant or Guardian Name (print): _____ Signature: _____

Date: ____/____/20____ (day/month/year)