

Application for Admission

Students Name: _____ Date of Birth: ____/____/____

Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Gender: M/F Email: _____

Home Phone: _____ Work Phone: _____

Cell: _____ Employer: _____

Occupation: _____

How did you hear about us

Yellow Pages Magazine Article Website New Paper Drove By Advertisement

Referred By: _____ Other: _____

General Information

1. How long have you been considering becoming involved in Martial Arts?

2. Can you commit yourself to attending a minimum of 2 classes per week?

3. Do you consider setting a goal of becoming a Black Belt?

For Students Only: Our academic policy for a Black Belt requires the maintenance of a "B" grade point average or higher. Is your grade point average currently a "B" or higher? _____, if not, would you be willing to commit yourself to striving to achieve a grade point average of a "B" or higher? _____.

NOTE: By signing below, the student or his/her guardian, acknowledge the possibility for personal injury while participating in a course of instruction in any activities such as Martial Arts, and that he or she is assuming this risk participating in said courses of instruction.

Student Signature: _____

Parent/Guardian: _____

Date: _____