## **Bennett's Taekwondo**



## Academy

## **Bennett's Taekwondo Academy Class Registration Form**

Cost: 8 Week Session \$150 for Single Student / \$200 for Family (2 or more) Circle one
(Does not include Testing Fees or Uniform Costs)

Session Dates:

	1220 Central (13th and Cen	tral), Kearne	ey, NE. 68847 Pl	hone: <b>308-224-72</b> 9	91	
	www.Benn	ettstaekwo	ondoacademy	.com		
	Method of payment: Check	Cash	Make Checks p	ayable to Tim Bennet	tt	
	P.O.	. Box 2611 Kear	ney, NE. 68848			
Family Name		Phone No			-	
Address:		То	wn:	State:	_ Zip:	
E-Mail						
Participants Name:		Age:	DOB:	Rank _		
Participants Name:		Age:	DOB:	Rank _		
Participants Name:		Age:	DOB:	Rank _		
Participants Name:		Age:	DOB:	Rank _		
	Traditional Taekwondo/Co	ompetitive Spa	rring (Check if doin	g both)		
We understand	the activities that my family has enrolle	ed in, and hereby	give my permission	and consent for their pa	rticipation. I do hereby	
absolve, release and	d agree to hold harmless Tim Bennett, N	//ark Reid, Gaby	Perez, it's sponsors, l	eaders, agents and volu	nteers from liability claim	
	in case of accidents and i	injury to all fami	ly members enrolled	in this program.		
Parent/Guardian Signature:			Date:			