



2018 YMCA Martial Arts Registration Form

1861 Adams Lane, Zanesville, Ohio 43701

740-453-9622

Martial Arts Registration Day is Saturday, October 27, 2018

Located at the Littick Hall/MRC, 1425 Newark Rd, Zanesville, 43701/ from 9:00 AM- 4:00 PM

Martial Arts/ Tae Kwon Do Prices:

Mighty Mite Martial Arts: Monday and/or Wednesday (6:00 PM - 6:30 PM) Ages 4-7: \$35 for session (1 Class per week) or \$50 for session (2 Classes/per week)

Tae Kwon Do: Monday and/or Wednesday (6:30 PM - 7:30 PM) Ages 8-12: \$50 for session (1 Class per week) or \$65 for session (2 Classes/per week)

Adult Tae Kwon Do: Monday and/or Wednesday (7:30 PM - 8:30 PM) Ages 13+: \$50 for session (1 Class per week) or \$65 for session (2 Classes/per week)

Program Location is located at Starlight Elementary, 1330 Newark Rd, Zanesville, OH 43701...Session runs October 29- December 12, 2018

Register for Classes Attending: Please Check Boxes that Apply

Mighty Martial Arts for Ages 4-7: Class runs 6:00- 6:30 PM 1 class a week \$35.00 2 classes a week \$50.00
Register for: Monday Wednesday Monday & Wednesday

Tae Kwon Do for Ages 8-12: Class runs 6:30- 7:30 PM 1 class a week \$50.00 2 classes a week \$65.00
Register for: Monday Wednesday Monday & Wednesday

Adult Tae Kwon Do for Ages 13+: Class runs 7:00- 8:30 PM 1 class a week \$50.00 2 classes a week \$65.00
Register for: Monday Wednesday Monday & Wednesday

Participant Name _____ Age _____ Grade _____ Male/Female

Address _____ City _____ Zip _____

Please list your phone number for our one call system: _____

Parent/Guardian Names _____ Email _____

Please list school your child attends (not district) _____

Release of All Claims and Promise not to Sue: I/we the parent/guardian of the above child, release the Muskingum Family YMCA, their employees, agents, officers and servants of any risks and hazards incidental to the above activity and hereby forever release, waive and relinquish the Muskingum Family YMCA, its instructors and supervisors, and all other persons assisting in the conduct of said activities to the participant. I/we understand that because of prohibitive costs, no accidental, health or life insurance covering the participants in this program will be procured and that my/our consent to the participation of the above named participant in this program is made with this understanding. **Photo Release:** I give permission to the Muskingum Family YMCA to use, without limitation or obligation, photographs, videos, sound track recordings and photo reproductions of the participant for purposes of promoting YMCA programs in concert with our YMCA website, facebook, Twitter and other social media outlets.

Parent/Guardian (Print) _____

Signature of Parent/Guardian _____ Date _____

For Office Use Only:	Date Received _____/_____/_____
Amount Received \$ _____.	Check # _____ Cash CC
Staff Initials _____	