



## Application/Registration Form Men's Self Defense Class

You must bring or mail this form to the Napa Taekwondo Academy: 3216 Jefferson Street, Napa, 94558 --- or E-mail to [Terrybrule@aol.com](mailto:Terrybrule@aol.com). Questions? Call Terry Brule at (707) 226-5869. For Ages 18 and Up. Seminar Fee is \$15.00 per participant, made payable to: "**Napa TKD**"

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### SEMINAR DATE

If you know the date and time of an established-class time, put that information in the space below. If you have not expressed interest in a class, you must contact the Napa Taekwondo Academy to obtain information on when the next seminar will take place.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Have you ever been convicted of any crimes involving violence or illegal drugs?

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Do you have any physical limitations that may limit your participation: Yes/No \_\_\_\_\_

If "yes" please explain \_\_\_\_\_

**I understand the nature of the offered seminar and that, by participating, there is a risk of injury to myself or others. By signing this Agreement I agree to indemnify, defend, and hold harmless the Napa Taekwondo Academy, its instructors, agents, and students from and against any claim of injury to person or property arising out of my participation in this seminar.**

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_