

MARTIAL ARTS CONNECTICUT - SHELTON

Complete this **mail-in registration form**, then mail it with a check for the full amount payable to: Martial Arts Connecticut, P.O. Box 830, Stratford, Connecticut 06614. If your check is returned by the bank for non-payment, there will be an additional \$40 fee which will be added to the amount due. You may include multiple family members on this form.

REMEMBER: ENROLL TWO FAMILY MEMBERS AND THE THIRD IS FREE!

Classes meet twice per week, year round at The Rinks at Shelton-SportsCenter. Prices are per session.

Shelton Class Session Schedule

Children's Karate (ages 5-7)	\$155
Beginner/Intermediate Karate (ages 8-adult)	\$159
Advanced Karate (ages 8-adult)	\$159

Session F	5/8/2010-6/30/2010
Session G	7/7/2010-9/1/2010
Session H	9/8/2010-10/30/2010
Session I	11/3/2010-12/29/2010

Student full name	age	Which class? Children's Karate Beginner Karate Advanced Karate	Session F, G, H or I?	Session fee	# of sessions	Total (session fee times # of ses- sions)
EMAIL: _____						Total

If student(s) is/are under the age of 18 (minors), a parent/legal guardian must complete the following:

Parent/Guardian Full Name	Full Mailing Address	Relationship to student	Telephone #

Student signature (or parent if student is a minor)

Today's date

This mail-in registration form is a "quick" registration to reserve your space in class. A full registration packet must still be completed for each student and can be obtained in class. Thank you and welcome to MAC!

