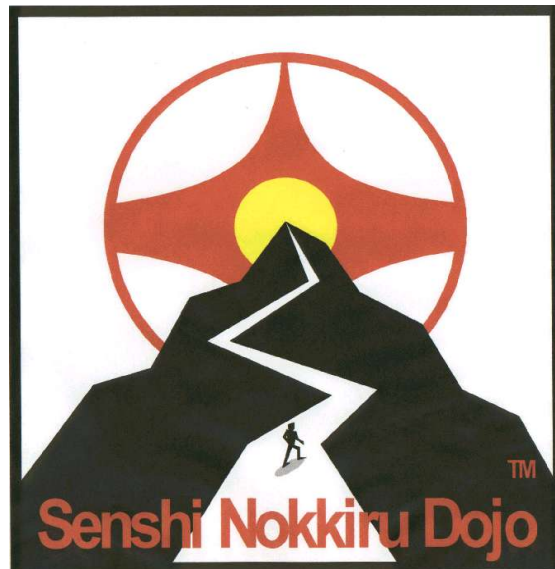


Senshi Nokkiru Dojo

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Entrance Application



Welcome!

Please fill out the following application in its entirety and return to the instructor. Applicants will be notified as to their acceptance. Some approved applicants may then be scheduled for a sit-down interview with the instructor immediately prior to the first class.

Please print. Please complete in entirety. Today's date _____

Name of Student _____
Last First MI

Street Address _____
Street City State Zip

Mailing Address if different _____

Home phone _____ Email address _____

Height _____ Weight _____ Hair _____ Date of birth _____ Age _____

Occupation, if applicable _____

In case of emergency notify _____ Phone _____

Please understand that if you or your child or ward is accepted for membership, there will be a sit-down interview with the instructor. The initial commitment will be for a 2-month, 16 class training period, during which time the student will meet for private lessons with the instructor (all classes will be held at the New Carlisle Lion's Club). Once a student completes all 16 classes, he/she will then be promoted to the next rank and be able to train with the class at large and attend any regular classes. Beginners will have take home assignments and will meet two times per week during the Introductory Period. Dues for students under 12 years of age are \$40/month, and students 12 and over of \$45/month. Please fill in the remainder of the questionnaire and return to Sensei George Arndt as soon as possible at the address below or at any class at the New Carlisle Lion's Club.

George Arndt, PO Box 841, New Carlisle, IN 46552

phone: 574.968.3810 fax: 630.604.7184 email: snd@runawaysnail.com www.runawaysnail.com

Why do you or your child/ward want to join karate?

Have either you or your child or wards ever participated in a martial art before, and if so, what was the result?

If a parent or guardian, are you willing to encourage your child, regardless of his/her physical talent, to fulfill at least a two month commitment?

Yes No

Will you complete, or will you child or ward complete any and all homework assignments that are given by the instructor?

Yes No

List any medical conditions or disabilities that you or your child/ward may have and how they are being treated.

Do you have any questions? If so, please include them below or on a separate sheet of paper.
