

# Dennis Brown Shaolin Wu-Shu Training Center

## KUNG-FU SUMMER ENRICHMENT PROGRAM

### SUMMER PROGRAM NECESSITIES

*Bring Lunch Daily • Bring Healthy Snacks*



### ACTIVITIES

- *Discipline/Focus Skills*
- *Museums*
- *Baltimore Aquarium*
- *Self Defense Awareness*
- *Movies*
- *Bowling*
- *Kung-Fu Classes*
- *Splash Park/Six Flags*
- *Basketball*
- *Gymnastics*
- *Chuck E. Cheese's*
- *Miniature Golf*
- *Discovery Zone*
- *Medieval Times*
- *Spirit of Washington Cruise*

### FEES

**\$99 Registration Fee**

**\$300 per session - \$10 off additional family members**

*Pay by Credit Card, Debit Cards, and Check*

**Your Child could be learning self-discipline, self-confidence, staying fit and having great FUN... INSTEAD OF JUST SITTING AROUND THE HOUSE!**

*Win trophies at the Summer Intramural Competition! • Participation receive a Certificate of Completion*

### REGISTRATION FORM

- Session 1     Session 2     Session 3     Session 4  
 June 21 - July 2    July 5 - July 16    July 19 - July 30    August 2 - August 13

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ T-Shirt Size \_\_\_\_\_ Uniform Size \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Email#1 \_\_\_\_\_ Email#2 \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

Describe any Allergies or Medical Conditions \_\_\_\_\_

How did you find out about our Program? \_\_\_\_\_

### WAIVER RELEASE FORM

I hereby agree to participate in the DENNIS BROWN SHAOLIN WU-SHU TRAINING CENTER, its officers, its directors, employees, coordinators, and agents, upon the understanding and agreement that:

1. You represent to us that you (the member) have no physical, mental or emotional illness that could impair training or that could make training injurious. While every effort will be made on our part to make the classes and facilities as safe as possible, you realize that any physical activity has the potential for injury and you waive any claim of accident and/or negligent tort damage against us and/or our principal, officers, or instructor resulting from the activity.
2. I also release the Dennis Brown Shaolin Wu-Shu Training Center from any liability arising from my use of any and/or all equipment provided by the Dennis Brown Shaolin Wu-Shu Training Center.
3. I understand that I will be held responsible for any negligent damage (replacement/repair) to equipment I am using that is owned or provided by the Dennis Brown Shaolin Wu-Shu Training Center.

Witness \_\_\_\_\_ Student \_\_\_\_\_

Parent or Guardian (if under 18) \_\_\_\_\_ Date \_\_\_\_\_