Riverdale Recreation Commission: Karate

Student Information

Registrants Name: _____Age_____

Does the student have any barriers we should be aware of? If so, please explain below:

Guardian Information

Parent/Guardian Name: _____Number_____

Parent/Guardian Email: _____

Emergency Contact Name & Number: _____

Program Information

Date: Thursday's, September 17 – December 10th
Duration: 12 Weeks (no class Nov 5)
Time: 6:30pm-7:30pm
Location: Riverdale Community Centre, Redfern Hall
Cost: $170.00 (RRC) + $55.00 (JKA annual fee) = $225

About: Discover the fundamentals of karate in a supportive, high-energy environment. Led by Sensei Ben Thompson, a 2nd Degree Black Belt with years of experience, this introductory course is suitable for everyone. You'll learn stances, strikes, and traditional forms while building strength, and discipline. No prior martial arts experience needed, just bring your enthusiasm and readiness to learn!

Payment Information

Payment must be made prior to program start!
RRC will accept cash, cheque (payable to "Riverdale Recreation Commission") or,
E-Transfer - send to: recreation@riverdalemb.ca with password: recreation

Medical Release

I hereby state that the above applicant has no physical or mental conditions that prohibit participation in the program. I also understand that it is my responsibility to inform the Riverdale Recreation Commission (RRC) in writing of any physical or mental conditions that the staff should be aware of in dealing with enrollee during activities and/or in case of emergency. Staff accept no liability for failure to inform them of any conditions or limitations. I am fully aware of and understand the risk, including the risk of catastrophic injury, paralysis, and even death, as well as other losses associated with participation in the program. I understand that the above conditions and risk and enroll the above-named person at his/her/my own risk. I hereby indemnify and hold RRC staff and instructors, harmless from and against any and all risk and liability assumed by or on behalf of the student, excepting them from acts of gross negligence by RRC's Staff.

Parent/Guardian Name & Signature: _____

Date: _____

Manager Signature: _____

OFFICE USE ONLY: Payment has been made in the form of a:

Chq: _____Cash: _____EFT:_____Receipt Issued: Y or N