

WATERLOO KUNG-FU ACADEMY

INTRODUCTORY CLASS QUESTIONNAIRE

Referred By: _____

(PLEASE PRINT CLEARLY.)

CLASS DATE: / /
MM DD YYYY

PROGRAMME: Little Ninja Youth (6 to 10 yrs.)
 Junior (11 to 14 yrs.) Adult Student

Personal Information

Student Surname: _____

Student First Name: _____

Date of Birth: _____

Address:
Street: _____
City, Province: _____
Postal Code: _____

Contact Information:
Home Phone: _____
Work Phone: _____
Emergency Name & Phone: _____
Email: _____

* Students Under Age 18 *

Parent/Guardian Name: _____

Parent/Guardian Name: _____

How Did You Hear About Us?

What has brought you to WKFA?

VIP Pass/Gift Certificate (Specify) _____

Yellow Pages

Location

Academy Signage

Referral

Website

Other (Specify) _____

Medical Information

Do you require approval from a Medical Doctor to participate in sports, e.g. kung-fu? **Yes** or **No** (please circle)

If **yes**, do you have approval to participate in kung-fu? **Yes** or **No** or **N/A** (please circle)

Check-off (✓) and provide details if you or the participant (if under 18) suffer from any of the following:

Diabetes _____

Epilepsy _____

Migraine _____

Haemophilia _____

Heart Disorders _____

Allergies _____

Respiratory Disorders _____

Joint Pains _____

ADHD / ADD _____

Other medical difficulties: _____

Martial Arts History

Do you have previous martial arts experience? If so, please describe experience: _____

Motivation

Reasons for practicing martial arts:

Self-Esteem Self Defence

Self-Discipline Fitness

Stress Management Weight Control

Social Aspect Flexibility

Sporting Aspect Self-Confidence

Philosophical Aspect Improved Concentration

Mind/Body Connection Self-Control

Other: _____

PLEASE READ CAREFULLY

The participant hereby releases and forever discharges WATERLOO KUNG-FU ACADEMY, the academy, DAVID J. MOYLAN, his officers, instructors, members and authorised guests from any and all actions, causes of action, claims and demands whatsoever for damage, loss or injury, howsoever arising which may hereafter be sustained by me in consequence of my trial class in the academy, and also agree that WATERLOO KUNG-FU ACADEMY, the academy, DAVID J. MOYLAN, and its members shall not be responsible for any loss or theft of the participant's personal possessions however caused.

I UNDERSTAND THAT THIS IS A COMPLIMENTARY CLASS AND THAT I AM UNDER NO OBLIGATION TO ENROLL.

PARTICIPANT'S or PARENT'S/GUARDIAN'S SIGNATURE (if under 18 years) _____

PARENT'S/GUARDIAN'S NAME (if under 18 years old) (please print) _____ Date: _____

WATERLOO KUNG-FU ACADEMY per: _____