WORLD OF MARTIAL ARTS, LLC
KARATE

Session 1 (4 weeks)
Monday's
Oct. 3 - Oct. 24
Cost: $40 K-1st & $45 2nd-6th
K-1st: 6:00pm - 6:30pm
2nd-6th: 6:45pm - 7:30pm
Please sign up by: Friday, Sept. 30
***Limited spots available**

Session 2 (4 weeks)
Monday's
Nov. 28 - Dec. 19
Cost: $40 K-1st & $45 2nd-6th
K-1st 6:00pm - 6:30pm
2nd-6th : 6:45pm - 7:30pm
Please sign up by: Wednesday, Nov. 23
***Limited spots available**

Participant Name:_____ Grade:_____

Parent Name:_____ Phone: _____

Street Address City/State:_____ Email:_____

Emergency Contact:_____ Phone:_____

Doctor's Name:_____ Phone:_____

List any physical problems which should be noted:_____

Please select which session: Session 1 ☐ K-1st Grade $40 (Please Circle) 2nd-6th Grade $45 (Please Circle) Session 2 ☐ K-1st Grade $40 (Please Circle) 2nd-6th Grade $45 (Please Circle)

PAYMENT METHOD

☐ **Check** *Make payable to City of Lewiston* ☐ **Cash** **Total:** _____ **Reciept #:**_____

☐ **Credit Card:** ☐ Visa ☐ Master ☐ Discover Name on Card: _____

Card Number: _____-_____-_____-_____ Exp. Date: _____/_____CVV Code: _____

The Lewiston Parks and Recreation DOES NOT provide medical or accident insurance coverage. The participant is responsible. If participant is a minor, parent/guardian is responsible. I/we assume all risks and hazards incidental to such participation and do hereby waive, release, absolve, indemnify, and hold harmless the Lewiston Parks and Recreation for any claim arising out of injury to myself or my/our minor child. I grant the Lewiston Parks and Recreation permission to photograph myself and/or my child/ward and use the photos in displays and promotional materials. This document shall serve as a release for me, my child/ward and our heirs. I have signed this release voluntarily, with full understanding, under perjury, under laws of the State of Idaho.

Signature:_____ Date:_____

Please fill out and return this form with payment to:
Lewiston Parks & Recreation • PO Box 617 *mail* 1424 Main Street *in-person* Lewiston, ID 83501
Ph.208.746.2313 • Fx.208.746.9110 • www.cityoflewiston.org/parksandrec

The City of Lewiston will make all reasonable modifications to programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities. Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures should make a request as soon as possible,but no later than 48 hours before the scheduled event, by contacting: City of Lewiston, Nikki Province, Human Resource Director at 1134 F Street, P.O. Box 617, Lewiston, Idaho 83501• 208-746-3671 x 6211, Fax: 208-746-1907 • nprovince@cityoflewiston.org