## Yi Champions TaeKwonDo Academy 5513 Mapledale Plaza Dale City, VA, 22193

## YCTA SPRING CAMP REGISTRATION FORM April 03- April 07& April 10, 2023

Buyer/Parent Nar	me:	Email		
Phone: Home	Work		Cell	
Address:				
Emergency Conta	act:			
Students Name: 1	)	DOB/	/Age:M / F	
2	)	DOB/	/Age:M / F	
Health Condition	\Limitations:			
Allergies:				
	CTA -\$225/ additional family (5-1/03 (MON) 4/04(TUE) 4/05(WEI			
Registration \$	Paid On	_/F	Field Trip Fee: \$ 30 or more	_
Total Camp Fee \$	Down Payment S	\$U	Jnpaid Balance \$	
Pay By	(In) Cash Cred	lit Card C	Check	
<b>Consent and Release For</b>	rm			
the participation of the YCT.	ned Buyer/Enrollee, hereby acknowle A Spring Camp given by the sponsors np. I hereby consent to allow the spon stance.	s. I hereby consent	to hold attendance of the Yi Cha	impions TKD
copyright, use, publish for an	the irrevocably authorize the Center, its rt, advertising, trade, or any other law ee(s) may be in whole or in part.			
enjoying the benefits of instr 1. I pledge to take care 2. I pledge never to us myself.	olls my son(s)daughter(s) ruction agrees to the below conditions e at all times to avoid injury to my fel se the knowledge gained from YCTA must stay with my team at all times an	s: low classmates and Spring Camp excep	d myself. pt to protect the honor of the defe	enseless and
manner of a student in TaeK faithfully fulfill my duty.	ng permitted to join the YCTA Spring wonDo in my daily life and in class, and agreed that any payment will not	and will never do a	nything to bring disgrace hereby	swear that I will
	(s):Buyer			
C	re:			