

Franklin International House of MARTIAL ARTS

REGISTRATION FORM

Master Dennis Whitt

Served in Marine Corps: 1977-1983

Master Whitt has achieved the following ranks:

MASTER: Shorin Ryu Karate and Kududo

SECOND: Degree Black Belt – Isshin Ryu

MASTER: Gongfu (Kung Fu)

First Degree Black Belt – Kwanmukan

BLACK: Belt – Judo



REGISTER THROUGH ESOFT THROUGH www.kingdomsportscenter.com

STARTS JUNE 12th, 2023

- INDIVIDUAL REGISTRATION ONLY
- \$65 PER CUBS individual Per Month - \$85 Per all other classed per Individual Per Month
- MONTH TO MONTH CLASSES
- MUST REGISTER/PAY EACH MONTH
- Wide Range of Ages Available
- Monday + Wednesday Classes (2 TIMES A WEEK) Per Month
- Shirts and other apparel can be purchased at a separate price from Master Whitt
- All Classes are CO-ED

CLASSES OFFERED:

- CUBS – 4:30-5:00 6+7 Year Olds – Coed
- TIGERS – 5:05-5:50pm 7-9 Year Olds – Coed
- LIONS – 5:55-7:00pm 9-17 Year Olds – Coed
- ADULT CLASS – 7:05-8:05 18+ - Coed

Kingdom Sports KARATE Entry Form: (Please use one form per adult / child)
REGISTER ONLINE AT KINGDOMSPORTSCENTER.COM

CIRCLE ONE: **BOY** **GIRL** CLASS: _____ MONTH: _____

Player's Name: _____ Parent's Name: _____

Email Address: _____ Cell Phone: _____

WAIVER/EXCLUSION CLAUSE (please read carefully and sign below)

I, the parent/guardian/Coach/participant, in registering at Kingdom Sports Center, Inc., understand that he/she/ in attending the Martial Arts program and using the facilities does so at his/her/my own risk. Kingdom Sports Center, Inc., Warren County, OH, and its/their owners, employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participant and his/her/my family in or about any programs on the premises. I acknowledge that I am aware of the risks inherent in participating in lacrosse (both practice and competition); that lacrosse is a physical sport which can require considerable running, starting, stopping and physical exertion; and could potentially lead to limb injuries; possible permanent disability and death. Participants and parents assume full responsibility for all injuries and damages which may occur in or about any programs on the premises and he/she/ do or does hereby fully and forever release, discharge and hold harmless Kingdom Sports Center, Inc., Warren County, OH, all associated facilities and its/their owners, employees and agents from any and all claims, demands, damages, rights of action, present or future resulting from or arising out of any person's participation in any programs or use of its facilities. In addition, he/she/ agree(s) to the following rules of play and conduct set by Kingdom Sports Center, Inc. He/she/ understand(s) that failure to do so may result in suspension from participation. Also, I waiver all rights to any photos or live video taken during practice or competitions for use in any Kingdom Sports Center, Inc. publication.

Parent/Guardian/Coach Signature: _____ Date Signed: _____ Player/Team will NOT be able to participate if the Wavier is not signed and dated.

For Office Use Only: Amount Pd. \$ _____ Amount Owed. \$ _____ Cash _____ Check # _____

VISA or MC _____ Exp. _____ Code # _____ Zip _____ Employee Initials _____ Date _____