



# WORLD OF MARTIAL ARTS, LLC

## KARATE



**Session 5: (4 weeks)**

**Wednesdays:  
April 6 - April 27**

**Cost: K - 1st Grade \$30 & 2nd - 6th Grade \$35**

**K - 2nd Grade: 6:00pm - 6:30pm  
3rd - 6th Grade: 6:45pm - 7:30pm**

**Please sign up by: Friday, April 1st  
\*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:      K - 1st Grade \$30       2nd - 6th Grade \$35

### PAYMENT METHOD

**Check** *Make payable to City of Lewiston*       **Cash**      **Total:** \_\_\_\_\_      **Receipt #:** \_\_\_\_\_

**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](http://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](mailto:nprovince@cityoflewiston.org)