



Enso Center for International Arts

8708 196th Ave NE Redmond, WA 98053

425.869.0276 --- <http://ensocenter.org>

Program Registration Form

Student Name _____ M/F _____ Birthdate _____ Age _____

Address 1 _____ Phone (cell) _____

Address 2 _____ Phone (home) _____

City _____ State _____ Zip _____ Phone (work) _____

Enter email contact information for the person being registered.

This should be your primary contact email.

If this registration is for a minor you can specify parent email contact information.

Email* _____

First Name _____

Last Name _____

*By providing my e-mail address, I give Enso Center permission to contact me via e-mail.
We respect your privacy. Your information will never be shared.

Note: Please fill out BOTH sides of this form

All information on this form remains at Enso Center and will not be shared by any other parties.

I realize that participating in Enso Center classes poses some risk of physical injury. I understand that I should participate in the classes only if I am medically able as determined by a physician and properly trained. I agree that instructors may authorize and/or provide emergency and/or basic first aid treatment for me. I assume any and all risks associated with participating in the classes including but not limited to: broken bones, sprains, contusions, internal and head injuries or illness. Such injuries may result from the following and other conditions or activities: falls, breaking boards, contact with students, instructors, and other participants, overexertion, surface conditions of the floor and walls, and lighting of the facility.

I waive, release, and discharge Enso Center, instructors, and any other persons connected with the classes from any and all claims or liability arising out of my participation even if that claim arises due to negligence or carelessness. I also agree that Enso Center may use, for publicity or promotional purposes, my name or pictures of me participating without liability or obligation to me.

I understand that tuition is non-refundable.

Date _____

Signature (or signature of Parent if under age 18) _____

Printed name of parent if student is under age 18 _____

Enso Center Programs:

_____ Full Martial Arts

REDMOND PARKS & REC SIGNUP: Y N

_____ Hapkido

belt level _____

_____ Weapons

_____ Archery

_____ Yoga

_____ MA FUNDamentals

belt level _____

_____ Tai Chi

_____ Parent/Child MA

Name:

Added to Database by:



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Emergency Contact(s):

_____ Ph# _____ Relationship _____

_____ Ph# _____ Relationship _____

Other family members currently enrolled in Enso Center programs:

_____ Relationship _____

_____ Relationship _____

_____ Relationship _____

_____ Relationship _____

_____ Relationship _____