



NORTH SHORE KARATE CENTER

Student Registration Form

Student Name _____

Parent's Name _____

Home Address _____

City _____ **State** _____ **Zip Code** _____

Home Phone _____ **Work Phone** _____

Cell Phone _____ **E-mail** _____

Participant's Date of Birth _____

Cost: \$595

Payment Method:

Check/Money Order – Make Checks Payable to Karate Life Skills

Credit Card (Visa MasterCard)

Credit Card # _____ Expiration Date _____

Fall 2010 Sessions (check one):

- | | |
|---|---|
| <input type="checkbox"/> Starts Monday Sept 13 2010 – 4:30 PM | <input type="checkbox"/> Starts Weds Sept 15 2010 – 4:30 PM |
| <input type="checkbox"/> Starts Monday Sept 13 2010 – 5:30 PM | <input type="checkbox"/> Starts Weds Sept 15 2010 – 5:30 PM |
| <input type="checkbox"/> Starts Monday Sept 13 2010 – 6:30 PM | <input type="checkbox"/> Starts Weds Sept 15 2010 – 6:30 PM |

Send completed form to:

Paul Sweetow

North Shore Karate Center

1050 Gage Street Winnetka, IL 60093

Or Fax To 847-441-0001