

Make Checks/Money Orders Payable to: VSK Annual Seminar



The VSK JiuJitsu Institute of Self Defense
presents our 6th Annual Seminar entitled:
WHEN WORLDS COLLIDE
Self Defense Complete Workshop

Hosted by Shihan Lemuel Muhammad
February 4th and 5th 2012

Official Registration Form

PRINT ONLY

First Name		Last Name		Age	Sex	Date of Birth	
Home Address				Phone:		Cell:	
City		State		Zip Code		Email	
Saturday Training <input type="checkbox"/>		Sunday Training <input type="checkbox"/>		Check all that apply		Method of Payment	
		1 Day <input type="checkbox"/>		2 Days <input type="checkbox"/>		Visa <input type="checkbox"/> MC <input type="checkbox"/> Check <input type="checkbox"/> # _____ Money Order <input type="checkbox"/>	
CREDIT CARD INFORMATION							
Name on Card		Card Number				Card Security Code	
Billing Address							
Street				City		State	Zip Code
Dojo/School Name:				Instructor's Name:			
City:		State:		Zip Code:		Website:	
Your Rank:		Years Training:			Your Style/System:		

Event Rate Schedule *Note: If mailing application, all payments must be post-marked by the specified date to receive promotional rate(s).*

- 1 Day Workshop \$45 If paid by November 15th 2011 or 2 Day Workshop \$60 If paid by November 15th 2011
- 1 Day Workshop \$60 If paid by November 30th 2011 or 2 Day Workshop \$75 If paid by November 30th 2011
- 1 Day Workshop \$75 If paid by December 15th 2011 or 2 Day Workshop \$90 If paid by December 15th 2011
- 1 Day Workshop \$90 If paid by December 31st 2011 or 2 Day Workshop \$100 If paid by December 31st 2011
- 1 Day Workshop \$100 If Paid after December 31st 2011 or 2 Day Workshop \$125 If paid after December 31st 2011

Instructors train for free when they bring 5 or more paying students (participants) with them.

WAIVER/RELEASE

In consideration of your acceptance of my registration, I do hereby, for myself, my heirs, executors and administrators waive release and forever discharge any and all rights and claims for damages which I may have, or which may accrue to me, against the VSK JiuJitsu Institute of Self Defense, Lemuel Muhammad, or their directors, or any of their affiliates or any and all members or the workshop/seminar/event or their respective officers, agents, representatives, and or assigns, and against any participants for any and all damages which may be sustained by me in connection with my association with my participation in or entry in the above instructional and athletic event and in connection with any medical services that may be provided in connection with any such injury or illness, I understand that this event is full contact and can cause injury or death and I take full responsibility for myself, son or daughter. I further understand that I may be dismissed from the premises without compensation or refund if my conduct is not courteous and cooperative for the successful operation of the workshop/seminar/event. I understand that any photos taken of me at this event may be used for promotional purposes without limitation and without compensation to me.

Signature of Participant/Parent or Guardian if Under 18 years old

Date