



TAE KWON DO



Offered monthly on Saturdays

COST: \$40 per calendar month

Remember! Registration fee must be paid by the last day of the month prior to the month for which they are registering. (Ex: February classes must be paid by January 31st.)

Location: Ramer Center – 515 W. Martin Street, Martinsburg, WV

Students will learn basic self-defense skills such as blocks, kicks and strikes. Participants will learn choreographed moves called forms. Also, students will learn various block and counter-attack drills with partners. Bag drills will be used to increase focus, power, and technique. In addition to learning new skills, classes offer increased flexibility, balance, coordination, and muscle memory. Our program offers beginner, intermediate and advanced classes.

Participants will be required to wear a white uniform (information to be provided to your family at your first class) *If you are just trying it out for the first time*, no need to feel obligated to purchase the uniform immediately. However, participants who continue to register for the class will need to purchase the uniform. All testing will be at the instructor's discretion and will carry an additional fee outside of M-BCP&R.

Please ✓ check the level you are registering for below.

<input type="checkbox"/> Beginner Class Time: 9:00am – 10:00am White to Yellow Belt Time: 9:00am – 10:00am Basic introduction of self-defense. Students start learning basic moves, forms, and 3 step drills.	<input type="checkbox"/> Intermediate Class Time: 10:00am – 11:30am Yellow to Black belts More involved training on moves sets, forms, 3 step drills, board breaking, and sparring. Students are encouraged to participate in TKD events/clinics.	<input type="checkbox"/> Advanced Class Time: 11:30am – 12:00pm Black belts. Advanced training/fighting techniques. Some weapons training. Students are transitioning into instructors
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Child's Name: _____ DOB: _____ Gender: M F

Address: _____ Age: _____

City: _____ State: _____ Zip: _____

Parents' Name(s): _____ E-mail: _____

1ST Phone #: _____ 2nd Phone #: _____

Cell # (for text alerts): _____ Carrier (Sprint, Verizon etc.) _____

Medical Conditions: Yes No If yes, please explain: _____

LIABILITY WAIVER: As a parent (legal guardian) of the above named minor, I grant permission for this minor to participate in all activities of this sports program. I assume all risks and hazards incidental to participating in this sports camp program. I do hold harmless the Martinsburg-Berkeley County Parks & Recreation Board, the coaches, assistant coaches, and any and all other volunteers, participants, and organizers for any claims arising out of injury to my child except to the extent and the amount covered by the accident or liability.

PHOTOS: The Martinsburg-Berkeley County Parks & Recreation Board reserves the right to take pictures at all events and programs. Pictures may be displayed in future Parks & Recreation brochures and publications.

MEDICAL RELEASE: I further grant permission for emergency first aid to be given to my child in the case of medical injury or emergency. If necessary, I grant permission for my child to be taken to the emergency room of a nearby hospital, and its staff had my authorization to provide treatment which a physician deems reasonably necessary for the well-being of my child.

PHOTOS: The Martinsburg-Berkeley County Parks and Recreation Board reserves the right to take pictures at all events and programs. Pictures may be displayed in future Parks and Recreation brochures and publications.

REFUND POLICY: Martinsburg-Berkeley County Parks and Recreation will give full refunds only for programs/leagues we are unable to offer.

INCLEMENT WEATHER POLICY: Please check our website www.mbcparcs-rec.org or [Facebook](https://www.facebook.com/mbcparksrec) for information on updates, upcoming programs, leagues cancellations or changes.

Signature: _____ Date : _____



You may register by mail or drop off your registration form to one of the following locations: (304) 264-4842- Berkeley 2000 Recreation Center Office, 273 Woodbury Avenue, Martinsburg, WV 25404 Mon-Fri from 9am-5pm or (304) 229-0022- Randy Smith Recreation Center, 40 Excellence Way, Inwood, WV 25428 Mon-Fri from 8:30am-3pm. You may also at our website: www.mbcparcs-rec.org. (Please note there is a 2.6% merchant fee when paying by credit card and a 1.0% merchant fee when paying online with an e-check.

COVID-19 LIABILITY RELEASE

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.
 I further acknowledge that M-BC Parks & Recreation has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.
 I further acknowledge that M-BC Parks & Recreation cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others.
 I voluntarily seek services provided by M-BC Parks & Recreation and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending your facilities.

I attest that:

- * I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- * I have not traveled internationally within the last 14 days.
- * I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- * I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19, in the last 14 days..
- * I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as non-contagious by state or local public health authorities.
- * I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19.

I hereby release and agree to hold M-BC Parks & Recreation harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of M-BC Parks & Recreation, or that may otherwise arise in any way in connection with any services received from M-BC Parks & Recreation. I understand that this release discharges M-BC Parks & Recreation from any liability or claim that I, my heirs, or any personal representatives may have against M-BC Parks & Recreation with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from M-BC Parks and Recreation. This liability waiver and release extends to the administration, staff, partners, and employees.

Signature: _____ Date: _____

OFFICE USE ONLY:

January	Beginner: <input type="checkbox"/> 3000.1100	A:	July	Beginner: <input type="checkbox"/> 3000.3100	A:
	Intermediate: <input type="checkbox"/> 3000.1101	#:		Intermediate: <input type="checkbox"/> 3000.3101	#:
	Advanced: <input type="checkbox"/> 3000.1102	D:		Advanced: <input type="checkbox"/> 3000.3102	D:
February	Beginner: <input type="checkbox"/> 3000.1200	A:	August	Beginner: <input type="checkbox"/> 3000.3200	A:
	Intermediate: <input type="checkbox"/> 3000.1201	#:		Intermediate: <input type="checkbox"/> 3000.3201	#:
	Advanced: <input type="checkbox"/> 3000.1202	D:		Advanced: <input type="checkbox"/> 3000.3202	D:
March	Beginner: <input type="checkbox"/> 3000.3000	A:	September	Beginner: <input type="checkbox"/> 3000.3300	A:
	Intermediate: <input type="checkbox"/> 3000.1301	#:		Intermediate: <input type="checkbox"/> 3000.3301	#:
	Advanced: <input type="checkbox"/> 3000.1302	D:		Advanced: <input type="checkbox"/> 3000.3302	D:
April	Beginner: <input type="checkbox"/> 3000.2100	A:	October	Beginner: <input type="checkbox"/> 3000.4100	A:
	Intermediate: <input type="checkbox"/> 3000.2101	#:		Intermediate: <input type="checkbox"/> 3000.4101	#:
	Advanced: <input type="checkbox"/> 3000.2102	D:		Advanced: <input type="checkbox"/> 3000.4102	D:
May	Beginner: <input type="checkbox"/> 3000.2200	A:	November	Beginner: <input type="checkbox"/> 3000.4200	A:
	Intermediate: <input type="checkbox"/> 3000.2201	#:		Intermediate: <input type="checkbox"/> 3000.4201	#:
	Advanced: <input type="checkbox"/> 3000.2202	D:		Advanced: <input type="checkbox"/> 3000.4202	D:
June	Beginner: <input type="checkbox"/> 3000.2300	A:	December	Beginner: <input type="checkbox"/> 3000.4300	A:
	Intermediate: <input type="checkbox"/> 3000.2301	#:		Intermediate: <input type="checkbox"/> 3000.4301	#:
	Advanced: <input type="checkbox"/> 3000.2302	D:		Advanced: <input type="checkbox"/> 3000.4302	D: