WORLD HAPKIDO FEDERATION (WHF)
PO Box 15523
Los Angeles, CA 90015 USA

Phone: 949.667.1195
Email: worldhapkidofederation@gmail.com
Web: http://worldhapkidofederation.com

Enso Center
8708 196th Ave NE
Redmond, WA 98053 USA

Phone: 425.869.0276
Email: info@ensocenter.org
Web: http://ensocenter.org

WHF & Enso Center International Seminar Registration Form • Nov 16 - 18, 2012

Name _____ M/F ____ Birthdate_____ Age ____

Address 1_____ Phone (cell)_____

Address 2_____ Phone (home)_____

Address 3_____
(City, State or Region, Postal Code, Country)

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 World Hapkido Federation & Enso Center seminar poses some risk of physical injury. I understand that I should participate in the seminar 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 seminar including but not limited to: illness, lacerations, broken bones, sprains, contusions, internal and head injuries. Such injuries may result from the following and other conditions or activities: falls, strikes, 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 World Hapkido Federation & Enso Center, instructors, and any other persons connected with the seminar from and against any and all claims or liabilities arising out of my participation even if that claim arises due to negligence or carelessness. I also agree that World Hapkido Federation & Enso Center may use, for publicity or promotional purposes, my name and/or pictures of me participating, without liability or obligation to me.

I understand that seminar fee is non-refundable.

Date _____

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

_____
Printed name of parent if student is under age 18

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Emergency Contact(s):

_____ Ph#_____Relationship _____

_____ Ph#_____Relationship _____

Martial Arts Experience:

Rank (dan/gup) _____

School Name _____

Instructor Name _____

WHF & Enso Center International Seminar Schedule & Payment Options

Seminar schedule:
Friday November 16th, 2012 @ 6:00pm – 9:00pm
Saturday November 17th, 2012 @ 10:00am – 1:00pm, 3:00pm – 6:00pm
Sunday November 18th, 2012 @ 10:00am – 1:00pm, 3:00pm – 6:00pm

Item Description	*Cost (USD)*	*Please fill out the table using the costs below. Paying before November 1st, 2012 offers the best value.*
Full Seminar		*Full Seminar is $150.00 USD if paid before November 1st, 2012. $200.00 USD after November 1st, 2012 or at event.*
Friday November 16th, 2012 @ 6:00pm – 9:00pm		
Saturday November 17th, 2012 @ 10:00am – 1:00pm		
Saturday November 17th, 2012 @ 3:00pm – 6:00pm		*Individual Sessions are $40.00 USD if paid before November 1st, 2012. $50.00 USD after November 1st, 2012 or at event.*
Sunday November 18th, 2012 @ 10:00am – 1:00pm		
Sunday November 18th, 2012 @ 3:00pm – 6:00pm		
Seminar T-Shirt (Circle size: XS, S, M, L, XL XXL)		
Total:		*Seminar T-shirts are available for $20.00 USD.*

Please make checks payable to:
Enso Center

Method of Payment (check one):

☐ *Credit Card* ☐ *Check #*_____ ☐ *Cash (Day of Seminar ONLY)*

Pay Online: We are currently working on the ability to pay online via credit card.

For now, enter your credit card information below:

Type of Card (Circle choice) *VISA OR MASTERCARD* *Card Number* _____

Name (as it appears on card) _____ *Expiration* _____

Charge Amount (USD) _____ *Security Code* _____

I authorize Enso Center to charge my credit card for the above amount.

Signature _____