Beresford Parks, Recreation and Community Education (PRCE) Taekwando Club

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305 W. Oak Street comed@bmtc.net Beresford, SD 57004 Phone: (605) 763-2094 Director: Brent M. Palmer Fax (605) 763-2705

Taekwondo is a non-violent martial art that teaches self-confidence, respect and discipline. Training in taekwondo will improve balance, strength, speed, flexibility and is a great stress reducer.

**Location:** Beresford High School MP Gym

**Classes Start Sept 15th**

**Class Times: Thursday Nights (Run Sept through June)**

6:30pm K–10yrs. old

7:45 pm 11 years old to Adult

Class Rates: $30 per month PAYABLE TO BERESFORD TAEKWANDO CLUB

Cut BELOW and turn in to PRCE MAILBOX IN SCHOOL OFFICE or at your first Taekwondo Class

***YOU MAY ALSO CALL THE INSTRUCTOR AND SIGN UP THAT WAY***

If there is an early dismissal or Holiday, classes will be cancelled. Instructors:

Dave Serck Cell: 605-929-7349 Email: dserck1@live.com (***6th Degree Black Belt and A Master Instructor)***

Chris Albers Cell712-631-0055Email: calbers1@hotmail.com ***(4th Degree Black Belt and a certified instructor)***

-------------------------------------------------------------CUT HERE AND KEEP THE TOP One Sheet per Child -----------------------------------------

PRCE Taekwando Club

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Current grade\_\_\_\_\_\_\_\_

CONTACT Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_accept texts?\_\_\_\_\_\_\_\_\_\_\_

Parent/guardian/s\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Local** emergency contact name/number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Beresford PRCE, Beresford School District and the Beresford Taekwando Club (Dave Serck), in making this recreational activity available for the participation of your child, assumes no responsibility for injury. The responsibility for injury is assumed entirely by the participant and/or the parent or guardian. Participants in recreational activities are not covered by any special insurance coverage, therefore, participants should have adequate insurance coverage. I ACCEPT THE RESPONSIBILITY AS STATED ABOVE.

Printed Parent/Legal Guardian Name Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2016