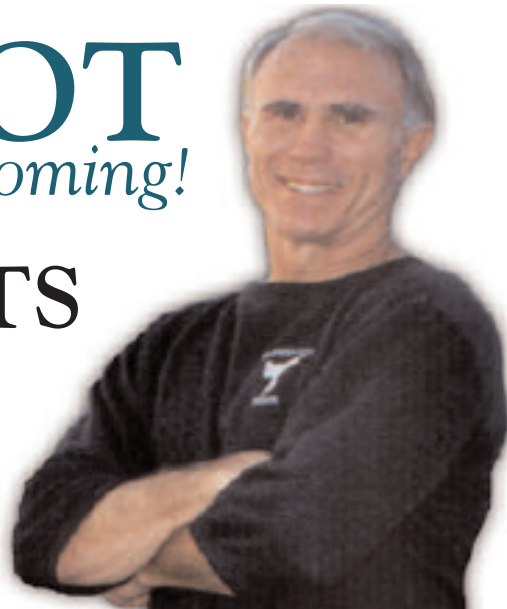


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Hosted by Sensei Ed Yuncza at
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Name _____ Age _____
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Phone _____ Cell Phone _____
E-mail _____

Session Attending:

- Session I: 9/25 (kids)**
 Session II: 9/25 (adults)
 Black Belt Training Clinic: 9/24

This session is open only to active E.Y. Martial Arts & Self-Defense Concepts students.

Amount enclosed \$ _____

Method of payment: **check** **money order** **credit card** **other**



Make all checks payable to: **E.Y. Martial Arts.**
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Signature (or legal guardian's signature if under 18)

Date