

*Man-Son-Hing Martial Arts Academy  
Inaugural Championship Registration Form  
December 7<sup>th</sup> 2013 at 10:00am*

**Last** \_\_\_\_\_ **First** \_\_\_\_\_ **MI** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Student Gender:** **M** \_\_\_\_ **F** \_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Parent(s) Information:**

**Last** \_\_\_\_\_ **First** \_\_\_\_\_ **MI** \_\_\_\_\_

**Last** \_\_\_\_\_ **First** \_\_\_\_\_ **MI** \_\_\_\_\_

**Address for each parent** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Emergency Contact:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Belt /Rank (Check one):**

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Novice: White/Yellow/Orange</b> | <input type="checkbox"/> <b>Intermediate: Green/Purple/Blue</b> |
| <input type="checkbox"/> <b>Advance: Brown/Red</b>          | <input type="checkbox"/> <b>Black ____ Dan</b>                  |

**\$45 Registration on-line or at tournament site.**

**Registration on day of event is at 8:30am - 9:30am**

**School Name:** \_\_\_\_\_

**School phone # (     )** \_\_\_\_\_ **e-mail:** \_\_\_\_\_

**Make payment to Man-Song-Hing Martial Arts.**

**Register on-line at [www.mshmartialarts.com](http://www.mshmartialarts.com)**