

# Mr. Ma Fencing, U.S.A.

## Fencing Registration Form

Please complete this form, sign and date it, and mail it to:

Mr. Ma Fencing, U.S.A.

P.O. Box 3637

Cherry Hill, NJ 08034

▶ **Make checks payable to: Andy Ma**

For more information, call 908-240-1911, fax 856-424-5073, or visit [www.fasj.com](http://www.fasj.com).

**Which locations are you going to attend: Cherry Hill , Hillsborough , Fairfield .**

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ (if under 18) Sex: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

May we send information and notices to your e-mail address?  Yes  No

Parent or Guardian: \_\_\_\_\_ (Please print.)

Home Telephone: \_\_\_\_\_

Emergency Telephone: \_\_\_\_\_

Class Name: \_\_\_\_\_

Which session you are signing (please circle):

Fall 2010,

Winter 2010

\* Class date & Time:

**New Student Fee: \$75**

**Advanced** Mon 7:00Pm-9:00Pm  Wed 7:00Pm-9:00Pm  Fri 7:00PM-9:00PM

**Intermediate** : Mon 6:00PM- 7:30PM  Wed 5:15PM- 6:30PM

Wed 6:00PM- 7:30PM  Fri 5:15PM- 6:30PM

Group Class Fee: **\$600**  **\$475**  **\$300**  (See fencing fee schedule on our Web site.)

Private Lessons Fee: + \$450 for 10 x 25 minutes private lessons

Total Enclosed: \$ \_\_\_\_\_ (Make the check payable to FASJ)

Fencing can be a strenuous physical activity. Do you have any medical conditions which would interfere with physical activity or fencing? Please explain.

\_\_\_\_\_  
\_\_\_\_\_

I release the Mr. Ma Fencing, U.S.A. its staff from any liability due to injury.

\_\_\_\_\_  
Signature (Parent or guardian if under 18)

\_\_\_\_\_  
Date

1. How did you find out about us? \_\_\_\_\_

2. What is it about fencing that interests you? \_\_\_\_\_

3. How do you hope to benefit from learning how to fence? \_\_\_\_\_

\_\_\_\_\_