

## Registration Form 2018-2019 Great Dragon Tai Chi – Kung Fu Academy

Program/Activity Name: **Kung Fu, Tai Chi, Self-Defense, Qi Gong, Push-hands, Weapons, Modern Combat training classes**

Ages: **5+**

Location: **Greater Philadelphia Area \ Willow Grove \ Hatboro \ Ft. Washington \ Newtown, PA; Online (Virtual Classes)**

Director/ Head Instructor: **Master Matt Zhang; Instructors: Master Zou, Rocky Zhang, Leo Zhang, Zhi Qiang, Ted, Sha, Valentino**

**费城东北区上课地址** Address: **6600 Bustleton Ave., Philadelphia, PA 19149**

**1a. KUNG FU 功夫 1 Age 5-10 Saturday 周六 2:00 - 3:00 PM**

**1b. KUNG FU 功夫 2 Age 11 and Up Saturday 周六 3:00 - 4:00 PM**

**2. TAI CHI 太极 (All Ages) Saturday 周六 4:00 - 5:00 PM**

**3. Self-Defense, Private Lessons 防身术、私人课 Saturday 周六 5:00 - 8:00 PM**

**Class Schedule Selection:** **费城中国 Chinatown, Philadelphia, Address: (5th floor) , 117 N 10th St, Philadelphia, PA 19107**

**4. TAI CHI 太极 Chinatown, Philadelphia Sunday 周日 2:00 - 3:30 PM**

**5. KUNG FU 功夫 Chinatown, Philadelphia Sunday 周日 3:30 - 5:00 PM**

**6. Self-Defense, Private Lessons 防身术、私人课 Sunday 周日 5:00 - 8:00 PM**

**7. Tai Chi-KUNG FU Willow Grove, PA Sunday Morning, M-F 8:00 AM ~ 7:00 PM**

**8. Tai Chi-KUNG FU Germantown Academy Saturday morning 9:30 AM ~ 12:00 PM**

**\* Private Lessons by appointment (\$60-80 per class) ; Seminars --- TBD**

**--- Including Tai Chi Push-hands, weapons, pressure points, Qi Gong, Self-defense, and combat strategies, etc.**

Registration Fee (pkg): **\$120** which includes one free Group Class, a set of uniform, a belt/sash, an instructional DVD, and admin fee.

### Registrant's Information:

Student Full Name 姓名: \_\_\_\_\_ 中文名 Chinese Name: \_\_\_\_\_

Age 年龄: \_\_\_\_\_ DoB 出生年月日: \_\_\_\_\_ Male 男 Female 女 (circle one)

Home Phone 电话: \_\_\_\_\_ Cell Phone 手机号: \_\_\_\_\_

Street Address 地址: \_\_\_\_\_

City/State/Zip 城市、州: \_\_\_\_\_ 微信号 WeChat-WhatsApp ID \_\_\_\_\_

Email 电子邮箱: \_\_\_\_\_

Parent/Guardian 家长监护人: \_\_\_\_\_ Child lives with this person: **Yes No** (circle one)

Full Name 真实姓名: \_\_\_\_\_

Phone Number 电话: Cell \_\_\_\_\_ Work: \_\_\_\_\_

### Special Needs/Medication:

### Payment Information:

Payment Method: Online PayPal Check Cash (circle one)

Online Payment: <http://realtaichikungfu.com/Registration.php> -- click "**Pay Now**"

PayPal Account Number: [mzhang@eastwest.us](mailto:mzhang@eastwest.us) or [taichigong@gmail.com](mailto:taichigong@gmail.com)

Make check payable to: "East West Institute"

QuickPay via Zelle: [xyzhang8@gmail.com](mailto:xyzhang8@gmail.com)

Paid total amount: \_\_\_\_\_

### Release:

- ✓ I grant permission for a licensed physician and hospital to provide emergency care for the above-mentioned individual. Ambulance cost is my responsibility.
- ✓ To the best of my knowledge, the participant is in good health and is able to participate in the activity. I understand that while the recreation program staff makes the safety of participants its top priority, no recreational activity is without some inherent risk of bodily harm.
- ✓ In case of accidents, I release East West Cultural Institute from all claims to personal injury and property damage which may result from participation in the above martial arts training, Tai Chi training, activity, competition, trip, camp and other programs. 如有意外事故发生, 我自愿放弃对“东西方学院 / 巨龙太极功夫研究院”因参加上述武术训练、太极训练、活动、比赛、旅行、冬夏令营以及其他项目的一切索赔。
- ✓ The participant will abide by all rules and regulations set forth by East West Cultural Institute relating to participation in the above training programs, trip and activities.
- ✓ As an adult parent/guardian, I am responsible for all transportation to and from the activity or bus pick-up point. **I have read and understood and agree to the above items.**

Signature 签字: \_\_\_\_\_ Date 签字日期: \_\_\_\_\_

### Registration Methods:

Onsite or Online Registration ---

<http://realtaichikungfu.com/Registration.php>

### Payment:

Cash (only when registering in person)

Check payable to "East West Institute"

### Address:

110 Lawnton Road

Willow Grove, PA 19090

Ph: 215-259-3038

Cell: 267-231-0111

Email: [taichigong@gmail.com](mailto:taichigong@gmail.com)