



**Spaces Limited  
Enroll Today !!**

**2010  
Spring Break  
Training Camp**

**March 22<sup>nd</sup>-26<sup>th</sup>**

**The Focus:** The focus of the camp is to instruct campers on proper techniques and progressions involved in martial arts. The camp is specifically designed to help students of all ranks enhance and develop the necessary skills to excel at their current level and prepare them to advance to the next level. Students will be placed in groups according to age and ability. The camp has three principles all students must follow: Have Fun! Be Safe! Work Hard!

**Camp Prices**

Single week camp **Only \$ 249.00**

**Black Belt Club Members**

Single week camp **Only \$ 210.00**

***Training  
and Fun I***

**Camp Schedule:** (Sample Schedule)

8:45am	Check in	1:30-3:00pm	Forms technique/ Games
9:00 - 9:30am	Warm up	3:00pm	Check out
9:30 - 10:30am	Technique/ Pad Drills		
10:30am - 12:00pm	Pad Drills/ Games		
12:00-12:30pm	Lunch		
12:30- 1:30pm	Forms/ Pad Drills		



**Check-in:** 8:45 AM each morning.

**Check-out:** 3:00 PM each afternoon

**Staff:** The camps head instructor is Russell O'Connor. Along with him will be Jeff Rumelhart, Sean Breen, Kyle O'Connor, and Nathan James. Actual instructors may vary depending on week and day of the camp.

**Medical Consent & Release of Liability:** Each camper MUST fill out a Medical Consent & Release of Liability Form. Campers will not be permitted to participate if we do not have a signed form. A form can be downloaded from our website [www.abkfun.com](http://www.abkfun.com) and submitted to:

**Location and Facilities:**

America's Best Kids Sports Center: 1914 Skypark Dr. Medford, OR 97504

541-245-0432

**What to Bring:** All campers will need to bring: workout clothes, weapons and sparring gear (if the student has them), snack and lunch daily.

**Class Instruction:** Classes will consist of curriculum, pad work, sparring drills, weapons for those who use them, video, and specialty items.

**How to Register:** Please stop by the front desk and fill out the attached registration form: A minimum, non-refundable deposit of \$50 per enrolled camp week is due with your application. **BALANCE IS DUE BY: March 1st**

**Cancellation Policy:** A \$50 service fee will be charged for each week canceled. No refunds are granted with in one week of the camp start date.

*Don't Hesitate! Camp is Limited and Fills Quickly!  
For further information call (541) 245-0432 ext 312 or email  
roconnor@abkkids.com*

# ABK's Spring Break Karate Training Camp

Child's Name \_\_\_\_\_

Age \_\_\_\_\_ DOB \_\_\_\_\_

Belt Rank: \_\_\_\_\_

Parent's Name(s): \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

**People authorized to pick up your child**

\_\_\_\_\_  
Name Phone

\_\_\_\_\_  
Name Phone

**Medications or Medical Conditions**

\_\_\_\_\_

**What do you want to work most?**

\_\_\_\_\_

\_\_\_\_\_

<p style="text-align: center;"><b>Camps Attending:</b> Spring Break Mar 22-26, 2010 Credit Card Payments Please Call 245-0432</p>	<p>Camp Total: _____</p> <p>Deposit: _____</p> <p>Balance _____</p>
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**Emergency Contact (other than parent or guardian)**

Name (1) \_\_\_\_\_

Relation \_\_\_\_\_

Phone No. \_\_\_\_\_

Alt. No. \_\_\_\_\_

Name (2) \_\_\_\_\_

Relation \_\_\_\_\_

Phone No. \_\_\_\_\_

Alt. No. \_\_\_\_\_

**Health Information**

Physician's Name \_\_\_\_\_

Phone \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_ Group #: \_\_\_\_\_

Name of Insured \_\_\_\_\_

Release of Liability. I understand that strict observation by me, of the rules and regulations of America's Best Kids, America's Best Karate of South Medford, LLC, as well as all affiliates of America's Best Kids, Inc including the use of protective equipment, will largely eliminate the possibility of accident or injury, and I hereby represent that I am physically fit to take the prescribed course of instruction and that I have had an opportunity to observe and/or participate in lessons prior to the signing of this agreement. I have chosen and voluntarily agree to use the facilities, equipment and resources provided by America's Best Kids at my own risk with knowledge of the risks involved. I further understand and agree that I release from liability and waive any and all claims or actions for personal injury or death or property damage or loss against America's Best Kids, its owners, officers, operators, employees and affiliated persons, whether caused by the fault, negligence, omission, or any other act however caused, of America's Best Kids, America's Best Karate of South Medford, LLC, as well as all affiliates of America's Best Kids, Inc

I have read and understand the above:

\_\_\_\_\_  
(If not 18 must be signed by parent or guardian)

**Medical Authorization:** I hereby authorize the staff of America's Best Kids to act for me according to their judgment in any emergency requiring medical attention, and hereby waive and release the school and its staff from any and all liability for injuries or illness incurred while in the school. I have no knowledge of any physical impairment that may affect the above named student participation in the program and have read and understand the terms and conditions outlined in the accompanying material including the membership agreement. X \_\_\_\_\_

**I agree to the terms of this agreement:**

\_\_\_\_\_  
Student/Parent or Guardian

\_\_\_\_\_  
ABK Representative