



**Kneehigh Ninjas®**

**Summer Day  
Class**

**Tae Kwon Do for  
Children Ages 4 to 6.**

**One week summer sessions**

**Monday to Friday 10:00 am to 2:00 pm**

**July 26 - 30, August 2 - 6, August 9 - 13**

**Just \$175 per week**

**10% family discount.**

**Tentative Schedule**

|               |                      |
|---------------|----------------------|
| 10:15 - 10:45 | Morning Exercises    |
| 10:45 - 11:00 | Break                |
| 11:00 - 11:30 | Games                |
| 11:30 - 12:00 | Lunch (not included) |
| 12:00 - 12:30 | Arts and Crafts      |
| 12:30 - 1:00  | Afternoon Class      |
| 1:00 - 2:00   | Free Play            |

# Kneehigh Ninja Summer Program

**(ages 4 to 6) Children must be potty trained!**

**Full week per child     \$175**

**10 am to 2 pm**

**(No REFUNDS for any reason once camp begins)**

*10% Family discount for each additional child / 10% discount for 3 or more sessions*

*T-shirt for all campers. Please bag a lunch for your child each day.*

**Please circle week:     July 26 – 30             August 2-6             August 9-13**

**Amount Enclosed: \$ \_\_\_\_\_ (checks payable to Jhoon Rhee TKD)**

1st Child: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

2nd Child: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

3rd Child: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Parents: \_\_\_\_\_

Street \_\_\_\_\_

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

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

EMERGENCY Contact #: \_\_\_\_\_ CONTACT NAME: \_\_\_\_\_

DOES YOUR CHILD HAVE ANY MEDICAL PROBLEM WE SHOULD KNOW ABOUT? \_\_\_\_\_

ALLERGIC TO ANYTHING? \_\_\_\_\_

## ***NINJA SUMMER PROGRAM SESSION WAIVER***

*NOBODY BOTHERS ME, Inc. Its employees, agents or volunteers assume no liability for injuries or damages arising or resulting from participation unless due to willful fault or gross negligence on the part of the employees, agents or volunteers. Due to the strenuous nature of some activities, the participant is urged to consult a physician concerning fitness to participate.*

*All activities present certain inherent risks and hazards which the participant and the parent or guardian are urged to consider and which the participant and the parent or guardian assumes. I hereby approve my child's participation in this session. To the best of my knowledge, the participant is medically fit to participate in this activity.*

*Being duly aware of the risks and hazards inherent in activities relating to the Ninja Summer Program, I hereby elect voluntarily to participate in said activities and/or authorize my child to participate in said activities. I voluntarily assume all risks of loss, damage, or injury that I my child may sustain while participating in the Ninja Summer Program activities.*

*I hereby authorize NOBODY BOTHERS ME, Inc. to seek immediate medical treatment for my child listed above, if a medical emergency rises while he/she participates in the Ninja Summer Program. I also authorize the attending physician to perform any emergency treatment necessary, after consultation with the representative of the Ninja Summer Program, if I cannot be reached.*

*I hereby release Chun Rhee, Jhoon Rhee, NOBODY BOTHERS ME, Inc., and all persons connected with said activities from any and all claims, demands and causes of action on account of injury which may occur from my child's participation in the Ninja Summer Program activities. I acknowledge that there are no refunds for any reason once the summer class begins.*

Parent or Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name: \_\_\_\_\_