



Parents Night Out or Movie Night
\$15 per friend with each paying ATA student
Pizza, popcorn and drinks included.

Non-Members Parent Permission Form

Form must be completely filled out and signed by parent or guardian to be eligible to participate and attend ATA Martial Arts Movie Night. If your child cannot have pizza, please send them another meal.

Child's Name: _____ Age: _____

Home Phone: _____ Cell Phone: _____

Medical Concerns: _____

Allergies: _____

Parent/Guardian Name (please print): _____

I acknowledge and agree on behalf of myself and my child(ren) identified above that: I am aware that participation in ATA Martial Arts of Flemington programs, parties, and/or use of the equipment creates a risk of injury, and I on behalf of myself and the participant(s), knowingly and freely assume all such risks, even if arising from the negligence of others. I further relieve the academy; it's management, assigned staff, and fellow students, from any liability resulting from personal injury or loss of personal belongings.

Parent/Guardian Signature _____ Date ____/____/____

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