



# BRIDGEWATER RECREATION COMMISSION

P.O. Box 216, Bridgewater, CT 06752 (860) 355-9133



**SPECIAL OFFER: FREE SESSION FOR U.S. VETERANS. TUITION WAIVED FOR TEN WEEK SESSION (MUST SHOW VET ID CARD)**

**TANG SOO DO KARATE for Adults / Children (age 7+)**      CLASS AT BURNHAM SCHOOL

Learn the skills of Tang Soo Do Karate from Black Belt instructor Lorraine Dunn-Laranetto of Bridgewater Karate. Classes are taught in a safe and positive environment with special attention given to developing a student's discipline, focus, and self-control. Open to all ages / levels. Parents are encouraged to join with their children.

**Lorraine Dunn-Laranetto**      **Thursdays**      **starts May 3, 2012**  
10 sessions      6:30-7:30 PM      \$70 for first student  
\$50 for each additional family member

**BO STAFF TRAINING for Adults / Children (age 7 +)**

Study the ancient art of stick-fighting using choreographed offensive and defensive moves. Free to those enrolled in Tang Soo Do Karate program who have achieved Apprentice Purple Belt designation or higher.

**Lorraine Dunn-Laranetto**      **Thursdays**      **starts May 3, 2012**  
10 sessions      7:35-8:00 PM      free to karate program enrollees

**Checks payable to: TOWN OF BRIDGEWATER**

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**TANG SOO DO KARATE WITH LORRAINE DUNN-LARANETTO**

PLEASE DETACH, FILL OUT COMPLETELY AND SIGN WHERE INDICATED. RETURN FORM TO BRIDGEWATER RECREATION COMMISSION OR TO INSTRUCTOR.

NAME \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ Age as of 05/03/12: \_\_\_\_\_

PARENT / GUARDIAN \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_ CELL \_\_\_\_\_

NOTIFY IN CASE OF EMERGENCY:

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

LIABILITY WAIVER

I/we hereby give my permission for \_\_\_\_\_ to attend the Bridgewater Recreation program "Tang Soo Do Karate" starting (date) \_\_\_\_\_.

I will hold harmless the Town of Bridgewater, its officials, agents, instructors, directors and employees for any and all injury or damage which my child personally incurs or injury or damage to the person or property of others which my child causes or contributes to while participating in this program.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name (print) \_\_\_\_\_