



University Aikido Club
UT Arlington

Registration Form - Summer 2008

Please fill out the form below and email to topham@uta.edu or fax to 817.272.5948

Child's Name _____

Age _____ T-Shirt Size _____ Adult Child
(choose adult or child to determine t-shirt size)

Home Address _____

City _____ State _____ Zip _____

Sex: Male Female

Guardian's Name _____

Phone _____ Additional Phone _____

Email address _____

Additional information (ex: medical conditions) _____

Cost (cash or checks payable to UT Arlington) \$125 _____