

# Gladiator Camp Application

## May 9th–11<sup>th</sup> 2025



### Participant Information

Name	
Age	
Gender	
Street Address	
City Street Zip Code	
Home Phone / Cell Phone	
E-Mail Address	
Instructor Name	
Rank	
ATA #	
T-Shirt Size	
Extra T-Shirt? (Add \$10)	
List any Medical Injuries that may limit Participation	

### Person to Notify in Case of Emergency

Name	
Street Address	
City Street Zip Code	
Home Phone	
Work Phone	
E-Mail Address	

### Agreement and Signature

By submitting this application, I confirm that I will hold myself to the behavior associated with the American Taekwondo Association. I understand that if I am accepted as a camper, any bad behavior, inappropriate actions, or other misrepresentations made by me may result in my immediate dismissal from camp.

Name (printed)	
Signature	
Date	
Parent/Guardian Signature (If Camper is under 18)	

### Payment

The Fee for the Gladiator Camp is \$225 (If ordering extra T-shirts, include in payment to Instructor). Payment must be made by **April 11<sup>th</sup>** to your instructor.

PLEASE E-MAIL THIS FORM to [roanoke@vanguardma.com](mailto:roanoke@vanguardma.com)