

# TANG LONG

## International Martial Arts

Traditional Shaolin Kung Fu taught by Disciples from  
the Songshan Shaolin Temple of China

### APPLICATION FOR MEMBERSHIP



Name	
Address	
Email	
Telephone/Mobile	
Date of birth	
Profession	
Next of kin- Name	
Contact Number	
Relation to you	
Have you studied martial arts before?	
Which other disciplines have you studied	
How long for?	
Why do you want to study Shaolin Kung Fu?	
What are your main interests (please tick as many that apply to you)-	<input type="checkbox"/> Weapons <input type="checkbox"/> Fighting forms <input type="checkbox"/> Acrobatics <input type="checkbox"/> Sanshou skills <input type="checkbox"/> Tai chi <input type="checkbox"/> Qi gong <input type="checkbox"/> Meditation <input type="checkbox"/> Buddhism <input type="checkbox"/> Chinese culture <input type="checkbox"/> General health and fitness <input type="checkbox"/> Self-defence skills.
How did you find out about our school?	
<b>Disclaimer</b> Attendance at these classes is entirely at the participant's own risk. The organisers, promoters and instructors accept no liability for injury or loss sustained before, during or after the class/workshops. Signing this form signifies that you have read and understood this disclaimer.	
I _____ confirm that I would like to become a member of the Tang Long International Martial Arts School and confirm that I have read and fully understood the disclaimer.	
Signed	Dated
Must be signed by an adult if applicant is under 18 years of age	