

SAFETY AWARENESS

AMERICAN KENPO KARATE / SELF-DEFENSE

(FOR BOYS AND GIRLS AGES 5 AND UP)

This program is designed to enhance self-esteem, safety awareness and self-discipline as well as promote communication skills, responsible citizenship, and drug avoidance. Students can progress to yellow belts or higher by continuing our following sessions, We do not fight. Defense and responsibility, rather than aggressiveness are emphasized. Class members may attend classes at our other locations at no extra cost.

The instructor is American Kenpo Karate 2nd degree Black Belt Mark Peterson.

FALL SESSION 2009



- PRACTICAL SELF-DEFENSE
- PARENTS MAY JOIN IN FOR FREE
- ALL COURSE MATERIAL PROVIDED
- CERTIFIED RANK WHITE TO BLACK
- NOT "TROPHY KARATE"
- NO HIDDEN COSTS
- NO PHONY RAFFLE OR SALE
- FREE ANNUAL KARATE CAMP



VISIT US AND COMPARE

Location:	John Glenn Mid. Sch., Gym #1, 1560 E. Co. Rd. B, Maplewood		
Dates:	TUESDAYS, OCT. 6,13,27, NOV. 10,17,24, DEC. 1, 2009 (no class Oct. 20 and Nov. 3)		
Times:	New students ages 5 and up	6:00-6:40	code SA150A
	Returning students	6:50-7:30	code SA150B
	Advanced students	7:40-8:20	code SA150C
Fee:	\$49 (7 weeks). Belt test is included.		



Students should wear loose clothing. Uniforms are available at class for \$30 each. For questions about class content, **adult classes**, or the annual camp, call Champion Youth at (763)427-0208.

Fee can be paid by cash, check or credit card (VISA or Mastercard), Make check payable to District 622 Community Ed.

Your fee and completed registration form will be accepted:

***In person or by mail at;**

**ISD 622 Education Center
Youth Enrichment
2520 E. 12th Ave.
North St Paul, MN 55109**



***By fax with credit card payment at;
(651)748-7497**

For questions call (651)748-7445

School District 622



SAFETY AWARENESS REGISTRATION FORM SEPT. 2009

STUDENT'S NAME _____

SCHOOL _____ BIRTH DATE _____

CIRCLE CLASS CODE:

NEW STUDENTS AGES 5 & up SA150A
RETURNING STUDENTS SA150B
ADVANCED STUDENTS SA150C

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PARENT'S NAME _____

PHONE - HOME _____ WORK _____

FORM OF PAYMENT: CASH _____ CHECK _____

VISA/MASTERCARD # _____

EXP. DATE _____ SIGNATURE _____

WHERE DID YOU HEAR ABOUT CLASS? _____

A Community Education Program

ISD 622 ED. CTR., YOUTH ENRICHMENT, 2520 E. 12TH AVE., NORTH ST. PAUL, MN 55109 (651)748-7445