



2025/2026 SEASON

PRAIRIE MARTIAL ARTS ASSOCIATION

Participants name _____ Age _____

Parent/guardians _____

Program name (please circle) Home School Kinder Karate Family class Teen/Adult/Adv.

Health Concerns _____

Email address _____

Phone number's _____

(e-mail and phone numbers are for Prairie Martial Arts notifications only. No information is shared outside of the organization)

PAYMENTS	INDIVIDUAL	2 ND FAMILY MEMBER	3 RD FAMILY MEMBER	4 TH FAMILY MEMBER	TOTALS
Fall Term Start to Dec.	\$225	\$205	\$175	\$150	
Winter Term Jan. to March	\$225	\$205	\$175	\$150	
Spring Term April to June	\$225	\$205	\$175	\$150	
1 day/week	\$150	\$150	\$150	\$150	
Uniform with PMA Crest	\$85	\$85	\$85	\$85	
Club t-shirt	\$30	\$30	\$30	\$30	
Form of Pay	Cash	E-transfer			
				Total to pay	

Additional fees for testing, tournaments and seminars will apply

******* ALL FEES ARE NON REFUNDABLE *******

Please make all e-transfer payable to pmastrathmore@gmail.com include the participants name in the memo portion and the program they are registered in. If a password is required please use 4038709853

FEES MUST BE PAID IN FULL PRIOR TO PARTICIPATING

PLEASE READ AND SIGN DISCLAIMER AND PARTICIPANT AGREEMENT



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