

Karate Do Shito-Kai Des Moines

315 E 5th St. Lower Level
Historic East Village. Downtown Des Moines, Iowa
Phone: (515) 650-5510 Website: www.karatedsm.com
Email: info@karatedsm.com



Student Registration Form

Student Name	M.I.	Student Last Name	
Guardian's First Name	M.I.	Guardian's Last Name	
Address Street	City	State	Zip Code
Primary Phone	Email		
Student's Date of Birth	Student's Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		

Please choose your class segment preference

- Mondays and Wednesdays (6pm)
- Tuesdays and Thursdays (6pm)
- Tuesdays and Thursdays (7pm)

Preferred method of billing

- Cash
- Check
- Credit
- Online Invoice

Invoices will be issued every month 7 days before the end of the month, the payment due date will be the first of each month.

By signing below, I acknowledge that I have received, read, and understand the Code of Duty and Dress Code, and agree to abide by the rules and expectations set forth by Karate Do Shito-Kai Des Moines and the WSKF.

Student/Guardian Signature

Date