



For office use only
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West Elk Soo Bahk Do Martial Arts

Student Information Sheet: Gunnison and Crested Butte

Welcome to West Elk Soo Bahk Do. We know that training will be enjoyable and will be full of many positive benefits. So we may serve you and your family better, please complete this questionnaire.

Date: _____

Student's Name: _____

If student is under 18: School: _____ Grade: _____

Parent's Name: Mom: _____ Dad: _____

Name of other caregiver: _____ Child's Height: _____ Weight: _____

Why does your child want to train?

Mailing Address: Street/Box _____ City _____ Zip _____

Phone: Home: _____ Work: _____ Cell: _____

Email: _____ Birth Date _____ Age _____ Race: _____

Occupation (for Adult students or parents): _____

Any health or physical restrictions we should be aware of?

What positive development would you like to achieve as a result of training?

How did you hear about our school?

Special Information we should have?

We are an educational non-profit that relies on volunteer assistance. Please use this space to tell us what skills or expertise you would like to share: