



**GM ZHU TIANCAI SEMINAR REGISTRATION FORM IN JAX MAY 21-23, 2010**  
 One registration form for each student

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Profession: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

How did you hear about this seminar?

Website  E-mail  Flyer  Mail Others: \_\_\_\_\_

Previous martial art experience/style: \_\_\_\_\_

If you need FL CEUs, please provide Lic. No: \_\_\_\_\_

<b>VENUE: TKA Center 1 1835-5 East West Pkwy Fleming Island FL 32003</b>		
For accommodation, please call Sleep Inn (a walk away) 904-215-8900 Mention Corp Acct # 418078 for special rates		
<b>Friday May 21</b> <b>6 – 9 pm</b>	<b>Sat May 22</b> <b>9 am – 12 / 2 -5 pm</b>	<b>Sun May 23</b> <b>9 am – 12 / 2 -5 pm</b>
Chen Taiji Trapping Hands Self-Defense Workshop	Taiji 18-Set Transformation Silk Reeling Healing Qigong	Fantastic Fan Form Balance & Harmony
<input type="checkbox"/> Friday Only - 45	<input type="checkbox"/> Sat or Sun - 150	<input type="checkbox"/> Sat and Sun - 250
<input type="checkbox"/> Super Early Bird Special 20% off before <b>May 7</b> <input type="checkbox"/> Early Bird Special - 10% off before <b>May 14</b> <i>Please call for Group or School discount.</i>		
Total _____		

For any inquiries, please call or email: [info@taijifungfuacademy.com](mailto:info@taijifungfuacademy.com)

Phone: (904) 777-2287

You can also register by Fax (904) 215-0708

Method of Payment:  By Check. Please make check payable to: Taiji Kung Fu Academy  
 Mailing Address: 1835-5 East West Parkway, Fleming Island, FL 32003

By:  Cash  Paid Online  Check # \_\_\_\_\_

Credit Card  Visa  MC  Amex  Discover

Card #: \_\_\_\_\_ SC# \_\_\_\_\_ Expired on: \_\_\_\_\_

Amount Received: \_\_\_\_\_ Balance: \_\_\_\_\_

*Refund Policy: 7 – 14 days before seminar – 100%    1 – 7 days before seminar – 70%    Day of seminar – 0 Refund*

For Office Use Only:	Staff Initial: _____	Date: _____
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