

SPECIAL ABILITIES STUDENT INTAKE FORM

Child's Name _____ DOB _____

Parent's _____

Address _____

City, State, Zip _____

Home Phone _____ Email _____

Work Phone _____

In consideration for my attendance and participation in this academy's martial arts training, I, the student/parent, acknowledge the existence of certain inherent risks in this type of training and hereby agree to assume all risks. I further relieve the academy, its management, assigned staff, and fellow students, from any liability resulting from personal injury or loss of personal belongings. I also hereby state that the students names above are physically fit to take the prescribed course of instruction and do so of their own free will for an agreed upon fee. I understand there is a no refund policy on any monies I will pay to this academy.

Signature _____

Date ____/____/____

1. What are you hoping your child gains from participating in this class:

_____ strength/fitness _____ increased social participation

_____ coordination skills _____ belt achievement

_____ other, please explain:

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2. What are your child's strength and/or weaknesses:

Please explain:

3. What is your child's learning style? Please check all that apply:

_____ by visual demonstration

_____ by verbal directions

_____ by learning through doing, repetition

4. Does your child have/had sensory problems? Please check all that apply:

_____ can tolerate being touched by others

_____ is bothered by noises

_____ able to establish eye contact

_____ other please explain:

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5. Does your child have any medical precautions that may prevent them from participating in certain activities? (An example may be something like forward rolls or somersaults). Please describe:

6. Are there certain situations that trigger behaviors? Please describe:

7. Is there any additional documents or information that you would like to share to help us better meet your child's needs? All documents and information will be kept strictly confidential.

_____no, not at this time

_____yes, see attached

Thank you,
Staff
ATA Martial Arts of Southern New Hampshire