



Three weeks Bujinkan Ninjutsu and self-defence beginners course Registration Form

Start Date of course.....

Name:

Date of birth:

Address:

.....

.....Post code:.....

Phone number:.....

Mobile phone no:.....

Email address:.....

Previous martial arts experience: yes/no

If yes please state:

.....

Any medical conditions: yes/no

If yes please state:

.....

Signed:

Date:

Please return this form with the £15 -full cost of the course to:

Jake Sharpstone
125 Cottenham Rd
Histon
Cambridge
Cb24 9ET

Cheques made out to Jake Sharpstone