

# Franklin Sherman Isshinryu Karate

Where physical fitness, personal safety, focus, confidence, self-esteem and self defense is part of everyday fun!!

Fall 2018 - After School Academy  
Every Tuesday, September 25<sup>th</sup> – November  
27<sup>th</sup> From 4:05 to 5:00PM  
A Franklin Sherman PTA Sponsored Activity!



Free Martial Art  
uniforms are  
provided to the  
students!

The instructor for this class is a highly qualified Black Belt with international Instructor certification through the IWKA and Penn State Karate

This program promotes mental and physical development through the study of traditional Karate, self-defense, and martial arts philosophy. The training offered includes Karate basics and Kata, self-defense skills and principles, fitness related activities, and leadership. The ultimate goal of Karate is to build one's character. **No previous training is required! This class is offered by a Kent Gardens Elementary school mom who is a Certified black belt Instructor!!**

The activities included: Basic self-defense skills, traditional karate forms known as Kata, tumbling skills/agility, a variety of Martial Arts activities, exciting/fun games, leadership training, board breaking, performance & awards (Trophies)!!! Character development, respect and self-control are promoted during the training to help students cope with and life pressures.

## Fall Session at Franklin Sherman

**Grades:** K – 6<sup>th</sup>  
**Cost:** \$160.00  
**Number of Classes:** Ten (10)

The Instructor for this class –  
Sensei Mami Geberegziabher – Renshigo  
5<sup>th</sup> Degree Black belt

[Mamimaya@yahoo.com](mailto:Mamimaya@yahoo.com)/703-868-6334



**\*\*\*Please return this form and check payment to “Manyahlushal Gebereegziabher” to the main office for the PTA by Monday September 24th\*\*\***

Name: \_\_\_\_\_ Grade/Teacher: \_\_\_\_\_

Parent Names: \_\_\_\_\_

Phone 1 And 2: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

Email for class messages and updates: \_\_\_\_\_

Please mark with “x” if: child will be picked up \_\_\_\_\_, or if child is attending SACC \_\_\_\_\_

Does your child have any physical limitations, conditions, or allergies? Yes \_\_\_\_\_  
No \_\_\_\_\_

Explain: \_\_\_\_\_

I hereby give permission for \_\_\_\_\_ to participate in the after-school class. While all reasonable precautions will be taken to assure my child’s safety and to prevent any injuries from occurring, I will not hold the Instructor, the school or the PTA and its officers and members liable for any accident that may occur.

In addition, I grant permission for the instructor, the school, and/or PTA officials to obtain emergency medical care (by calling 911) for my child if it appears necessary. Be advised photos or video may be taken during classes or other events and may be displayed on Year Book related materials or provided to the parents.

Parent/Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact us: **703-868-6334** or **mamimaya@yahoo.com**