



**Krav Maga Worldwide**  
**Black Belt Only Weekend June 7-8, 2008**  
 Sherman Oaks, CA  
**Registration Form- BY INVITATION ONLY**

\*\*\*PLEASE SUBMIT ONE REGISTRATION FORM PER INSTRUCTOR\*\*\*  
**CHECK SPELLING!!**  
 NAMES WILL BE PRINTED AS THEY ARE SPELLED HERE.

**REGISTRATION FORM**

Licensee Name and number		Instructor Name	
School Name			
Home Address			
Home Phone	(   )	E-mail	

**SELECTION**  
*(Enrollment is limited – Please reserve your space in advance and SAVE \$\$)*

Event Description / Dates	Location	Deadline For Paperwork & Fees	Fee (p/person)	Total Paid
Black Belt Only Weekend June 7-8, 2008	Sherman Oaks, CA	May 26, 2008	\$99.00	

<b>REGISTRATION FEE : Non refundable after May 26, 2008</b>	Total Due
---	-----------

**BILLING INFORMATION**

Please mail or fax registration form along with your credit card information to:  
 Krav Maga Worldwide, Inc. - 11500 W. Olympic Blvd., Suite 545, Los Angeles, CA 90064  
**Phone (310) 477-9977    FAX (310) 477-9722**

<b>Check One</b>	<input type="checkbox"/> Advanced Training Payment (Mo/Year) _____/_____	<input type="checkbox"/> Check # _____	<input type="checkbox"/> Credit Card
------------------	--	--	--------------------------------------

Credit Card Number		Exp. date	
Name on Credit Card			
Billing Address			
Signature			

\*\*\*\*\*NOTE: Please register in advance for all courses\*\*\*\*\*