

俊多加税泰

Heng Yue Yen Long Kwon Kung Fu

Easter Kung Fu Camp



If you want your child to know more about Chinese Kung Fu, or, if you want your child to have a meaningful and an unforgettable holiday which he deserves, join our Easter Kung Fu Camp which will include **Dexterity Chinese Kung Fu Training, Nunchaku Skills and Performance Skills.**

Schedule	Week 1: 1 A	pr – 6 Apr	Week 2: 15	Apr – 20 Apr	Week 3: 22 A	pr – 27 Apr
Time	11:00am – 1:00pm or 3:00pm – 5:00pm					
Tuition fees: 2- To enroll, please fil No.9 Morrison Hil	\$1688 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1 \$1	62288 form below		\$3488 ack to our Head	\$3988 quarters at 10/J	F, Morrison Plaz
Kung Fu Limited" b						
Headquarters: 10/F Mor Causeway Bay Branch: Website: www.hyylkma	1A, 37 Leighton Road,	Causeway Bay,			Tel: 2511 8787 Tel: 2803 4603	
	Eas	ster Kung F	'u Camp Reg	istration For	m	
	Eas	ster Kung F	'u Camp Reg		m	Gender:
Name of Student:	Eas	ster Kung F	'u Camp Reg Date	istration For	m	
Name of Student: Address:	Eas	ster Kung F	Lamp Reg Date	istration Form	m 	Gender:
Name of Student: Address: Current kung fu cl	Eas	ster Kung F	Camp Reg Date	istration Formof birth:	m 	Gender:
Name of Student: Address: Current kung fu cl Contact person:	ass: P	hone no:	'u Camp Reg Date	istration Formof birth:	m 	Gender:
Name of Student: Address: Current kung fu cl Contact person: I would like to enr	ass: P	ster Kung F hone no:	'u Camp Reg Date	of birth: Belt level: Email:	m 	Gender:
Name of Student: Address: Current kung fu cl Contact person: I would like to enr Type e.g. 3-d	Eas ass: P	hone no: Easter Kun	Camp Reg Date Date	of birth:Belt level: Email:	m 	Gender:
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Name of Student: Address: Current kung fu cl Contact person: I would like to enr Type e.g. 3-d	ass:P	hone no: Easter Kun	Date Date	of birth:Belt level: Email:	m e slot	Gender:

I have enclosed a cheque for \$______(Bank: _____ Cheque No: _____)

Date: _____

Signature of parent/guardian: _____