

Martial Arts - Tae Kwon-Do - Self Defence - Kickboxing Training - For Men Women & Children

Thank you for your interest in Tae Kwon-Do classes, in the Devizes area.

I would like to take this opportunity to personally invite you to **2 FREE Taster Lessons** at your local TAGB Tae Kwon-Do School.

Along with this invite is a first lesson questionnaire, which I would like you complete and bring with you to your first lesson.

During your two FREE taster lessons, you will be given an enrolment pack containing all the relevant information required to join, including details of cost, equipment required and application forms. Please note at no time are you obliged to join.

If during your FREE taster lessons you have any questions please do not hesitate to ask any of the Instructors

For your FREE taster lessons you will need to wear, tracksuit/jogging bottoms and tee shirt/sweat shirt please bring with you a drink in a sealable/sports bottle and the completed First Lesson Questionnaire.

I look forward to seeing you soon.

Yours in Tae Kwon-Do



Craig Ellingworth - 3rd Degree Black Belt
TAGB Tae Kwon-Do Instructor
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Your Local TAGB Tae Kwon-Do School is	Devizes
Training Venue:	Nursteed Community Primary School Brickley Lane Devizes Wiltshire SN10 3BF
Training Times	6.30-7.30pm Mondays Juniors 5 -10 years 7.30-8.30pm Mondays Adults & 11 years plus
Notes: These classes are suitable for beginners and existing Tae Kwon-Do students.	

FREE TRAINING VOUCHER

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FIRST LESSON QUESTIONNAIRE:

Thank you for taking an interest in this TAGB Tae Kwon-Do School.
Before you take part in any lesson you **MUST** complete this basic questionnaire **FULLY** and hand in to the school instructor at your first **FREE** lesson.

Students Full Name		
Full Address including postcode		
Telephone Number		
Email Address		
How did you hear about TAGB Tae Kwon-Do?		
Have you done any martial art training before? If yes please give details		
Is there any known medical reason why you should not take part in a Tae Kwon-Do lesson?		
<p>Do you suffer from any of the following? HEART DISORDER / ASTHMA / MIGRAINE / EPILEPSY / DIABETES / NERVOUS DISORDER / HAEMOPHILIA / HAY FEVER / Any others.....</p> <p>If YES please give details:</p>		
Signed	Date of first FREE lesson	
Parents to sign if student under 16 years of age		

FREE TRAINING VOUCHER