Taekwon-Do for Beginners

The benefits of Taekwon-Do include increased physical fitness, coordination, balance, concentration, self-discipline, and self-confidence. The DSA Taekwon-Do curriculum is adapted to the needs of the student while developing new areas of competence and strength. Students will learn basic Taekwon-do techniques including strikes, kicks, blocks, stances, and self-defense in a fun and supportive environment.

The instructor, Manuel Darson Andaya of DSA Taekwon-Do, is a 3rd degree blackbelt who began training in 2007 at the age of 10. He has won many competitions throughout his career, including 4 times as a Canadian Champion and 3x as a North American and Caribbean Champion. He has also represented Canada in two World Championships. Manuel is also big brother to DSRF student, Darryl Andaya who started training at the age of 8 and achieved his blackbelt in 2017.

Classes will be held at DSRF and a DSRF staff member or volunteer will assist with participant supervision.

Once DSRF registration is confirmed, students or guardians must complete the DSA registration and liability waiver form: https://goo.gl/U6YG3G

<table>
<thead>
<tr>
<th>Dates</th>
<th>Class Schedule</th>
<th>Fee</th>
<th>Class Size</th>
<th>Ages</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 13 to May 9, 2019</td>
<td>Thursdays 3:45 pm - 4:45 pm</td>
<td>$367.50</td>
<td>8</td>
<td>12 and up</td>
<td>DSRF</td>
</tr>
<tr>
<td>(no class on December 20, 27, 2018, January 3, March 14, and 21 2019)</td>
<td></td>
<td>(30 classes)</td>
<td></td>
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</table>

Students can also purchase uniforms from DSA at a cost of $35.

Registration

Client’s Information
Last Name: ___________________ First Name: ___________________
Address: ______________________
City: ___________________ Postal Code: _________________
Phone: ___________________ Date of Birth: _______________
Parent Name: ________________
Phone: ___________________ Cell: _______________________
Work: ___________________ Email: _____________________

Payment Information:
[ ] Cheque attached
[ ] Please charge my [ ] Visa [ ] Mastercard Amount $_______
Name on Card: __________________________
Card Number ______ / ______ / ______ / ______ expiry date _____ / _____ code ____

Cancellation Policy: All withdrawal requests must be received by nimet@dsrf.org one week prior to the start of the program. No refunds after the start of the program.

For questions or to register please contact Nimet Tejpar at 604-444-3773 or nimet@dsrf.org

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Burnaby, BC
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Empowering Individuals with Down Syndrome