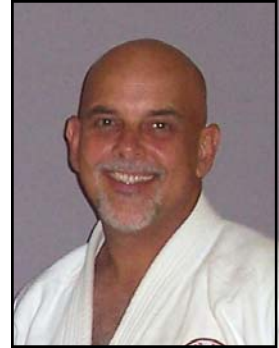
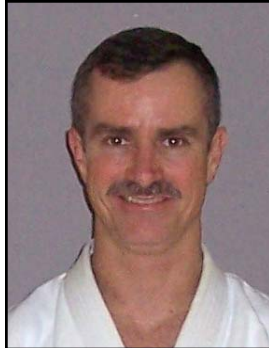


Martial Arts

Sept. SEMINAR 5 & 6th

2008

Shihan Rey Perez & Renshi John Varnell



Shihan Rey Perez has been training, teaching and competing for over 30 years. He is a 7th Dan in Shuri-Ryu Karate and a 6th Dan in Shintoyoshin-Kai Jiu-Jitsu. Mr. Perez competed extensively in Florida during the 70's and 80's, earning a rating among the top ten fighters by Karate Illustrated. Shihan is a Chief Instructor for the American Budokai International and currently operates the South Florida Academy of Martial Arts.

Seminar Schedule

Children: Saturday 10 AM – 12 PM
Adults: Friday 7 to 9 PM
Saturday 1 to 5 PM
 Cost (Child) \$ 35 ~ Saturday
 Cost (Adult) \$ 35 ~ Friday Only
 \$ 60 ~ Saturday Only
 \$ 85 ~ Both Days
 (\$10 Discount for Active ABI Members)

“Pre-registration Recommended”

Renshi Varnell has been training in the Martial Arts for more than 28 years. He is a 6th Dan in Shuri-Ryu Karate and a 2nd Dan in Shintoyoshin-Kai Jiu-Jitsu. He is a direct student of late Master John Pachivas having trained with him from 1980 to 1997. Renshi Varnell is the Senior Instructor for the South Florida Academy of Martial Arts currently owned and operated by Shihan Rey Perez.

Registration Form

(Please Submit Payment and Registration Form to The Martial Arts Center)

The undersigned hereby acknowledges the existence of certain risks in this type of training and agrees to assume all risks and responsibility. He/she further relieves The Martial Arts Center, Inc., Michael Hernandez, Rey Perez, John Varnell, assigned instructors, and any other person or persons acting on their behalf, of all liability resulting from personal injury or loss of personal property. The undersigned further stipulates that he/she is physically sound and that he/she has medical approval to proceed with this type of training & will provide their own health/accident insurance. The undersigned agrees that this release shall remain in force indefinitely from the date above.

Name: _____ Parent or Guardian: _____ D.O.B: _____ Phone _____

Address: _____ City: _____ State/Zip _____ Email: _____

Signature of Student or (Parent/Guardian if under 18 Years of Age) _____

Seminar Location: The Martial Arts Center
 2947 C North Druid Hills Rd. Atlanta, Georgia 30329
 404/315-1040 ~ TMACenter.com