

# BOUT

Boxing, Kickboxing, Muaythai & Hapkido  
Training & Fitness Center.

Tel# 9867932494 / 9867183000, Mumbai, India,  
Email Id:contactbout@gmail.com www.bout.co.in

Passport  
size  
Photograph

## REGISTRATION FORM

(Form should be filled with Block Letters. Age limit – 8 yrs and above)

Name: \_\_\_\_\_  
Surname First Name Last Name

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_ yrs Gender: M/F D.O.J: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Height: \_\_\_\_\_ cms Weight: \_\_\_\_\_ Kg Blood Group: \_\_\_\_\_

Injury or any Medical Treatment in last 6 months or a year: Yes \ No  
If Yes Specify in detail : \_\_\_\_\_.

Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Mobile # \_\_\_\_\_ Days / Time : \_\_\_\_\_ Email Id: \_\_\_\_\_

**METHOD OF PAYMENT:**  Cheque  Cash  Online

I Agree that the above information is correct

The Training Center/Club is not responsible for any kind of injury during training

(Signature)

### Participant Preparation Instructions:

- \* Wear clean athletic footwear, cross-trainers or kickboxing shoes with light tread for foot rotation
- \* Wear appropriate workout apparel, loose fitting clothing, Track pants, T shirt or tank top
- \* Gloves and hand wraps will have to be bought by the trainee.
- \* Plenty of Water and a towel
- \* Pen or pencil for notes
- \* Advise the course conductor of any special health issues
- \* Please arrive 15 minutes before the scheduled start.

-: For Office use only :-

-: Customer Receipt

Name : \_\_\_\_\_

Amount Received : \_\_\_\_\_

Date : \_\_\_\_\_

(Signature of **BOUT** official)

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