



Wheatley Taekwon-Do For children and adults

For Information: (775) 287-8262

Why should you enroll your child in Wheatley Taekwon-Do? To:

Improve their concentration skills.

Build their confidence.

Increase their discipline.

Help develop their respect for others.

TENETS: Courtesy, Integrity, Perseverance, Self Control, Indomitable Spirit

Have them learn from the best. The instructor for these courses is the president of the International Taekwon-Do Federation in the United States.



REGISTRATION:

Please make checks payable to
"Wheatley Taekwon-Do"

PO BOX 33205

RENO, NV 89533

Zelle payments to: 775-287-8262

For information please contact
Master Robert N. Wheatley.

Information: (775) 287-8262

Email: rw_usitf@sbcglobal.net

www.usitf.com

WHEATLEY SCHOOLS

At *Dancin!* TKD
Performing Arts Center
4786 Caughlin Parkway
Classes 2pm Saturdays
(Private Lessons By Appointment)

Fascinating Rhythm TKD
9736 South Virginia Unit E
Classes 6:30pm Tuesday
Classes 6pm Fridays

HUNSBERGER: (WEDNESDAYS)

May 7th - June 4th 2025

2:50pm to 3:50pm - \$75.00



Hunsberger
ELEMENTARY

Members welcome to attend additional classes at Wheatley Taekwon-Do studios.

Please fill out the form below and return to the instructor.

NAME: _____
ADDRESS: _____
(City) _____ (State) _____ (Zip) _____
AGE: _____ EMAIL: _____
CONTACT PHONE: _____

REGISTRATION

Please make checks payable to:

"Wheatley Taekwon-Do"

PO BOX 33205

RENO NV 89533



I hereby apply to participate in the Wheatley Taekwon-Do Academy. If I am accepted, I pledge to obey all rules and regulations which are set up for the purpose of maintaining order and protecting student from injury. I recognize the necessity of my adherence to these rules due to the risk involved in martial arts. I understand that training at Wheatley Taekwon-Do Academy involves strenuous physical exercise therefore I have submitted details of any physical conditions I may have which would render me unable to participate or continue in this activity. In consideration of accepting my application I hereby release Grandmaster Robert N. Wheatley, all instructors, facility owners and authorized guests from all responsibility for, and from all claims due to any injuries I may receive while on the way to practice, during practice and on the way from practice, whether held at the academy or other locations. The parent or guardian of the applicant hereby requests that this application be accepted, and in consideration thereof agree to indemnify all Wheatley academy instructors, facility owners and authorized guests including National and International governing bodies from all claims made by, or on behalf of the applicant for the aforesaid consideration. (Note) Wheatley Taekwon-Do Academy may refuse instruction.

APPLICANT'S SIGNATURE: _____ DATE: _____

GUARDIAN'S SIGNATURE (If under 18): _____