



Charlottesville Fencing Alliance Registration Form

Please fill out a separate form for each family member you are registering.

Date: _____

Last Name: _____ First Name: _____

Street Address: _____

City/State/Zip: _____

Birth Date: _____ Male Female

Parent Name(s) (if registering a minor): _____

[Please use parents' contact information if registering a minor]

Email Address: _____

Home Phone: _____ Cell #1: _____ Cell #2: _____

Emergency Contact Name and Phone Number: _____

Registration For: Please Check All That Apply

Membership (\$150; 50% discount for add'l family members) Unlimited Classes (\$105)

Beginner Class (\$175; \$125 for 2nd family member): Youth/Family Adult Homeschool

Homeschool Intermediate Club (\$150) Homeschool Advanced Club (\$150)

Other _____

Total Fee Owed: \$ _____

Please make check payable to CFA. We also accept cash.
Please add 3.5% for VISA/MC/AMEX

How did you hear about CFA?

Internet Friend Magazine Ad Flyer Other: _____