

MARTIAL ART FITNESS CENTERS, INC.

2849 S. Broadway • Rochester, MN 55904 • 281-4335

PREMIER TRAINING PROGRAM – Evaluation Form

List 5 aspects of the martial arts that are the most important to you.

1. _____
2. _____
3. _____
4. _____
5. _____

What are your 3 most important martial art goals right now?

1. _____
2. _____
3. _____

If you had only 6 months left to spend in the martial arts, how would you train?

What are your 3 greatest martial arts strengths that you have developed thus far?

1. _____
2. _____
3. _____

In what 3 areas of the martial arts would you like most to improve?

1. _____
2. _____
3. _____

CHECK OFF THE AREAS IN WHICH YOU WOULD LIKE TO FOCUS:

___Self-Defense ___Weapons Defenses ___Power Development
___Free Sparring ___Ground Grappling ___Speed Development
___Forms Training ___Promotion Test Prep ___Black Belt Principles

NAME _____ ADULT___ TEEN___ YOUTH___

MARTIAL ART _____ CURRENT RANK _____

PHONE _____ EMAIL _____

DATE _____