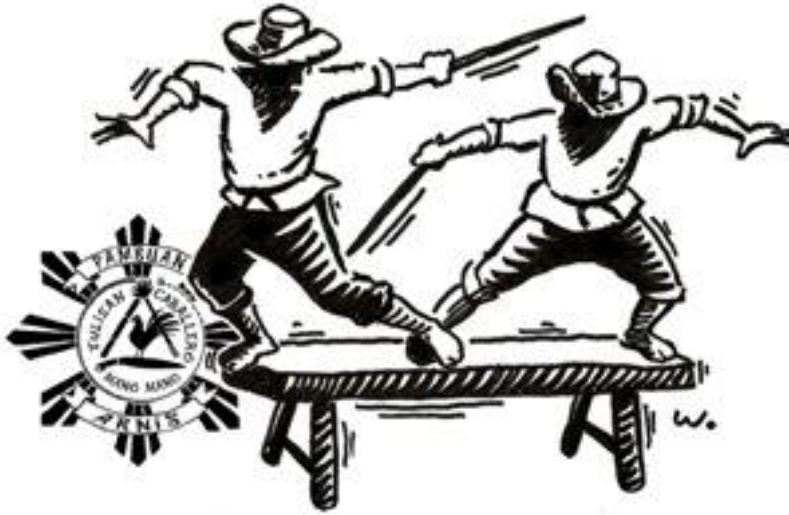


PAMBUAN ARNIS
-PROUDLY PRESENTS-



THE 5th ANNUAL PAMBUAN HERITAGE SEMINAR

Participate and Celebrate in our heritage of the Filipino Martial Arts as taught by 5th Generation Inheritor of his family art Ama-Guro Raffy Pambuan as taught to him by the 4th Generation Inheritor Lolo-Guro Isidro Pambuan

INCLUDED: *Awards Banquet Dinner at Universal Studios V.I.P. Lounge – Saturday Night 6PM - 10PM*

AND *an all you can eat BBQ buffet lunch – Sunday 12PM – 1:30PM*

TRAINING: *Saturday 9AM – 4PM with 1 hr. Lunch / Sunday 10AM – 5PM with 1 and a half hr. Lunch*

ACCOMODATIONS: *Quality Inn, 9000 International Drive, Orlando, FL, 1-800-999-8585 or 407-996-8585*

(mention Pambuan Arnis Group or Booking ID #22877 for Group Discount - \$58 per night + tax)

Saturday & Sunday March 12th & 13th, 2011

TRAINING WILL COVER SOLO BASTON (SINGLE STICK) ~ DOBLE BASTON (DOUBLE STICK) ~ ESPADA Y DAGA (SWORD & DAGGER) ~ DAGA DEPENSA (KNIFE DEFENSE) ~ MANO-MANO (HAND TO HAND)

**Seminar Location - Traditional Martial Arts Center -
2220 Hempel Ave. - Gotha, FL 34787**

Seminar Fee: \$200 Paid On/Before 2/20/2011 ~ \$225 Paid After 2/20/2011 ~ \$250 at the Door!
10% Discount for each additional family member (Living under same roof.)

No Videotaping/Video-Cameras Allowed! Bring 2pr. Of Sticks, Training Blade, and Safety Gear! All Participants Receive a Pambuan Arnis Certificate of Participation.

There will be a special demo by Pambuan Arnis Family Members & Friends at the end of Event.

This is a great opportunity to enhance your training & enjoy Spring Break!
Seminar – Liability Waiver

I, _____ the undersigned, acknowledge that my use of techniques taught in this seminar may or may not be effective in actual self-defense situations. Injury may result from improper use or practice of these techniques. I assume all risks, responsibilities, and liabilities for the use of these techniques.

I hereby, for myself, my heirs, executors and administrators, waive and release any and all right or claim to damages against the instructor (Rufino Pambuan) and or assistants of this seminar, the organizers (P.A.T.C.A. and/or Pambuan Tactical) of the seminar, property owner, landlord, its officers and servants, for any loss of property or injuries that I may sustain during the course of the above activity.

I further acknowledge that decisions to use or not use any self-protection techniques are solely my responsibility.

1. I have read and agree to the above.
2. I agree to, at all times, practice in a controlled, safe manner.

Attendee Name: _____ Date of Birth: ____/____/____
(PLEASE PRINT LEGAL NAME)

Attendee Name: _____ Date of Birth: ____/____/____
(PLEASE PRINT LEGAL NAME)

Address: _____

City: _____ State: ____ Zip: _____

Phone: _____ Emergency Phone: _____ Cell Phone: _____

Contact in Case of Emergency _____

E-Mail Address: _____

Medical Conditions: _____

Special Dietary Needs: _____

Extra Banquet Place Setting \$60 Each _____ X \$60.00 = _____
Pambuan Arnis Seminar _____ X \$____.00 = _____
Grand Total: _____

Attendee Signature: _____ Date: _____

Attendee Signature: _____ Date: _____

Parent Signature if under 18 years of age: _____ Date: _____

Return this form with registration fee. Make Checks Payable to: **Rufino T. Pambuan**
Ama-Guro Raffy Pambuan
1411 Prairie Oaks Court
Ocoee, FL 34761