



ELITE KARATE **Membership Application**

Member Name: _____ Today's Date _____

Male Female, Age: _____ Birthday: _____ T-Shirt size _____ Uniform size _____

If member is a minor, parent or guardian's name: _____

Home Address: _____ City _____ Zip _____

Home Phone Number: _____ Work Phone Number: _____

Email Address: _____ Cell Number: _____

Employer or School Name: _____

Occupation /Position/Grade: _____

Emergency Contact Name: _____ Phone Number: _____

Do you have any Health Problems : Yes No , If answer Yes, Please describe :

What are your reason for taking karate (check all that apply):

Sport Self-Confidence Self-Discipline Recreation

Weight Loss Self-Defense Physical Conditioning Tournament

Concentration Problems Other: _____

Do you have any Martial Arts experience ? Yes No , if Yes, Please describe style and level:



How did you hear about our program (check all that apply):

- Sign Walk-By Flyer Direct Mail
- Yellow Page Magazine Radio Other: _____
- Referral. Name: _____

I have received information about the program, tuition plans, class schedule and waiver form, all questions have been adequately explained prior to enrollment. Note, this is not a contract and we do not share any of these information with anyone unless consent by the undersigned. 30 day notice is required for cancellation. No Refunds.

Member's Signature : _____ Date: _____
(If under age of 18, parents or guardian's signature)



ELITE MARTIAL ARTS

20323 Huebner Road, Suite 108, San Antonio, TX. 78254 210-481-5466

ENROLLMENT AGREEMENT

New Renewal Cancellation **Today's**

Date _____

The Undersigned (student/buyer) agrees to take, and this school hereby to teach the student a course of Taekwondo Martial Arts lessons during the next _____ months under the terms and conditions hereinafter set forth.

Program Name: _____

TUITION (Please mark "X" the applicable selection below)

Registration Fee: Little Dragon \$ 60 _____ Kinder/Kid/Teen/Adult \$ 60 _____

KinderKicks / KidKicks / TeenKicks / Adult: (2 class per week)

Three Months @ 150 per month = \$ 450 _____ Six Months @ \$ 150 per month (-) 5% discount = \$ 855 _____

Little Dragon : +

Three Months @ \$ 120 per month = \$ 360 _____ (2 classes/wk) Three Months @ \$ 70 per month = \$ 210 _____ (1 classes/wk)

Program Tuition \$ _____ **Cash Down Payment \$** _____ **Unpaid Balance \$** _____

Non-Refundable Membership Fee \$ _____ This includes a free student uniform and administrative fee.

The undersigned promises to pay the "Unpaid Balance" Shown above in _____ monthly installments of \$ _____

With the first installment being payable on _____ day of _____, 20____ and all subsequent installments due on the FIRST class of each month until paid in full. All monthly installments will be paid to Elite Martial Arts. \$ 5 Late Fee will be accessed if the payment is received after 5 days from the due date of each month. Additional \$ 25 fee will be charged for each NSF check. If account is in default Elite Martial Arts will forward this contract to a collection agency and the undersigned will be responsible for all associated fee, i.e., collection fees, court costs, attorney's fees and any other fees incurred.

Student Name _____ DOB _____ Phone _____

Address: _____

Party responsible for Payment:

Name _____ DOB _____ Phone # _____

Address: _____

(If address is the same as the student, please mark "Same As Above")



BUYER'S RIGHT TO CANCEL

You have the right to cancel this contact within 3 business days after the contract is signed without any reason. The notice must be written and delivered or mailed within 72 hours from the date of the contract is signed. After you cancel, the school will keep the non-refundable registration fee and may request the return of all contracts, membership cards, martial arts clothing & equipment. The notice must be delivered or mailed to:

20323 Huebner Road, Suite 108, San Antonio, Texas 78258

You may cancel this contact if you relocate your residence further than 25 miles from the school. This contract may also be cancelled if you die, or if the school ceases operation at the location where you entered into this contract. If you become disabled, you shall have the option of (1) being relieved of liability for payment on that portion of the contract term for which you are disabled, or (2) extending the duration of the original contract at no cost to you for a period equal to the duration of the disability. You must prove such disability by a doctor's certificate, which shall be enclosed with a written notice of disability sent to the school. Upon cancellation, the school will retain the tuition, non-refundable registration fee and any delinquent tuition for services up to the day of cancellation.

This contract is fully transferable. Please notify the school when and to whom the contract will be transferred to once it is determined. This contract may also be deferred up to 6 months under a special arrangement that is both agreed upon by the school and the buyer of said contract.

Student signature

Date

Cosigner

Date



Consent to use photograph

I, _____, the parent of _____, a student of Elite Karate, for good and valuable consideration the receipt and Sufficiency of which is hereby acknowledged, agree for myself and on behalf of my child, that Elite Karate can photograph my child and use a Photograph, image, or depiction of my child for commercial purposes of Elite Karate to promote and advertise Elite Karate on its website or in other media. I understand and agree that Elite Karate is using the photograph, image or depiction for the commercial benefit of Elite Karate. I understand and agree that Elite Karate will pay no additional compensation to me or my child for the use of the photograph, image, or depiction; and hereby waive for myself and on behalf of my child any right or claim against Elite Karate to assert any claim in the future to any compensation or reimbursement for the use of photograph, image, or depiction.

Signature

Printed Name

Date _____



ELITE KARATE, LLC

RELEASE AND WAIVER

Student Name _____ Age _____
Address _____ City _____ Zip _____
Telephone _____ DOB _____ Sex _____

I hereby make application for membership with the Elite Karate, LLC. And upon acceptance I sincerely pledge to obey all rules and regulations, which are set up for the purpose of keeping the order of this school and for the protection of pupils from injury.

During practice, no hard contact is encouraged for lower rank student (below Orange Belt) and especially for the Little Dragon class (Age 3 & 4). During the sparring sessions, the student agrees to wear a mouthpiece, headgear, groin protector and other necessary protection gears.

In consideration of accepting my duty into the school, the undersigned student, and/or parents and/or guardian thereof, releases and forever discharges Elite Karate, LLC. Its heirs, successors, officers, employees, instructors, assistant instructors, members, coaches and fellow students from any and all actions, cause of actions, liability, claims and demands upon or by reason of any damage, loss, injury, or suffering known and unknown which may be sustained in connection with the in course of receiving this school's training and techniques on these premises under the instruction, supervision or control of Elite Karate, LLC.

I hereby release the landlord and its agents and contractors from all responsibilities and all claims for injuries I may receive in the leased premises, parking areas and common areas of the shopping center.

The student, participant, parent, or legal guardian thereof, hereby agrees to individually provide for the possible future medical expenses for injury sustained from the class, training, demonstration and tournament. Should any accident occurs, I hereby give my permission to Elite Karate, LLC. and its employee, instructor, assistant instructor or coach to administer basic first aid treatment for minor injury (small bruise, bumps or cuts) or to obtain trained medical professional to administer emergency medical treatment to my child/self.

I further consent that if I am invited to participate in any of promotional activities host by Elite Karate, LLC. or my picture was advertised in the school's advertising material, I will waive the compensation in regard thereto.

If I am under the age of 18, my parents or legal guardian will acknowledge this waiver on behalf of me. This Acknowledgment of Risk and Waiver of Liability have been read thoroughly, understood completely and is signed voluntarily as to its content and intent.

Student's signature (if over age of 18) _____ Print Name _____ Date _____

Parents / Legal Guardian's signature _____ Print Name _____ Date _____
***** THIS WAIVER DOES NOT EXPIRE *****