

STUDENT INFORMATION AND MONTHLY MEMBERSHIP DUES AGREEMENT

STUDENT NAME _____

AGE _____ GENDER: M F

DATE OF BIRTH _____

ADDRESS _____

CITY _____

STATE _____ ZIP CODE _____

HOME PHONE _____

MOTHER'S NAME _____

PLACE OF EMPLOYMENT _____

OCCUPATION _____

E-MAIL ADDRESS _____

BUSINESS PHONE _____

CELL PHONE _____

EMERGENCY CONTACT _____

CREDIT CARD INFO:

Card Type    

Card # _____

Exp. Date _____

Secutiry Code _____

Amount \$ _____

TODAY'S DATE _____

HOW DID YOU HEAR ABOUT OUR STUDIO?

FATHER'S NAME _____

PLACE OF EMPLOYMENT _____

OCCUPATION _____

E-MAIL ADDRESS _____

BUSINESS PHONE _____

CELL PHONE _____

PRIMARY PHONE # _____

SECONDARY PHONE # _____

DOES THE STUDENT HAVE ANY MEDICAL CONDITION(S) OR PHYSICAL LIMITATIONS WE NEED TO BE AWARE OF?

YES _____ NO _____ IF "YES", PLEASE LIST BELOW

1. _____
2. _____
3. _____

PLEASE LIST ANY MEDICATIONS THAT THE STUDENT IS CURRENTLY TAKING BELOW

MEDICATION	PRESCRIBED BY	TO HELP WITH WHAT PROBLEM

DOES THE STUDENT HAVE ANY SPECIAL CHALLENGES OR LEARNING NEEDS THAT WE NEED TO BE AWARE OF?

YES _____ NO _____ IF "YES", PLEASE LIST BELOW

1. _____
2. _____
3. _____

WHAT ARE THE KEY GOALS THE STUDENT HOPES TO ACHIEVE?

1. _____
2. _____

PLEASE NOTE THAT ALL STUDENT INFORMATION IS CONFIDENTIAL AND ROBINSON'S KARATE DOES NOT SHARE DEMOGRAPHIC

OR CONTACT INFORMATION WITH ANY OUTSIDE AGENTS



MEMBERSHIP AGREEMENT

All Membership Plans at Robinson's Karate Company are month-to-month "pay as you go" plans. Payment of monthly dues are satisfied with a credit card. All monthly dues are due by the **1st OF EACH MONTH** and each succeeding month thereafter. Unless we are notified in writing of your membership cancellation **A \$10.00 LATE FEE CHARGE** is added to monthly dues if dues are received after the **7th OF THE PAYMENT MONTH**. Because your membership is month-to-month, you have the option to cancel your monthly dues at any time and discontinue your membership privileges at Robinson's Karate Co. A 30-day advance written notice is required for cancellation and a full month's dues will be due. In order to avoid payment of the following month's dues you must cancel your membership **BY THE 1st OF THE PREVIOUS MONTH. (X)** _____ (Parent's Initials)

MEMBERSHIP DUES:

I have read and fully understand the above information regarding monthly dues and membership payments at Robinson's Karate Company. I am aware of the month-to-month membership I have enrolled in and I am aware that I will be charged monthly dues whether I use the studio or not until such time as I choose to cancel my membership in writing. I am aware of the cancellation procedures to stop monthly dues.

WAIVER AND RELEASE:

I (buyer and all members listed on agreement) agree that by engaging in any physical exercise, class, or activity, or use any company equipment or facility on the premises, I do so at my own risk. I agree that I am voluntarily participating in activities and use of the facilities and premises (including the parking lot) and assume all risk of injury, illness, damage or loss to me or my property that might result, including, without limitation, any loss or theft of any personal property. I agree to release and discharge you (and your affiliates, employees, agent, representatives, independent contractors, successor, and assigns) from any and all claims or cause of action (known or unknown) arising out of your negligence. I acknowledge that I have carefully read this Waiver and Release and fully understand that it is a release of liability. I am waiving any right that I may have to bring legal action to assert a claim against you for your negligence.

PHOTOGRAPHS AND VIDEOS: All photographs and video taken become the property of Robinson's Karate Ltd. and can be used for promotional purposes without compensation. _____ (Parent's Initials)

MEMBERSHIP RULES AND REGULATIONS: I agree to follow all rules and regulations now in force or in the future adopted by Robinson's Karate Company, including, but not limited to, rules and regulations with regard to hours of operation, use of equipment and facilities, personal hygiene and attire. We reserve the right to revoke or suspend your membership, without refund if you fail to follow the rules and regulations for reasons of nuisance, disturbance of other members and/or guests, moral turpitude or fraud, or if we determine that your actions may endanger yourself or other members, guests, or employees.

BY: Stephen A. Robinson
Employee Signature

MEMBER (Print) _____

DATE: _____

PARENT, GUARDIAN,
CO-SIGNER (X) _____