



Membership Agreement

Member Name _____
Studio Location _____

Membership Selection

Age Group	Membership Term	Program Selection
<input type="checkbox"/> Age 3-5	<input type="checkbox"/> Month-to-Month	<input type="checkbox"/> American Kenpo / Kali
<input type="checkbox"/> Age 6-9	<input type="checkbox"/> Six-Months	<input type="checkbox"/> Judo/Jujitsu
<input type="checkbox"/> Age 10-13	<input type="checkbox"/> 12-Months	<input type="checkbox"/> Youth Martial Arts
<input type="checkbox"/> Age 14+	<input type="checkbox"/> Summer Only	<input type="checkbox"/> Fitness Programs
	<input type="checkbox"/> School Year Only	<input type="checkbox"/> Other (Specify) _____

Payment Arrangements

<input type="checkbox"/> Paid in Full	<input type="checkbox"/> Monthly Payments
<input type="checkbox"/> Cash	<input type="checkbox"/> Cash
<input type="checkbox"/> Check	<input type="checkbox"/> Check
<input type="checkbox"/> Visa/Mastercard/Discovery	

Membership Begins _____	Membership Renewal Date _____
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Media Release

By Mark of my/our Initials here, I/we indicate that I/we grant permission to CKKMA to use the image of this member. Such use includes the display, distribution, publication, transmission or otherwise use of photographs, images and/or video taken of the member for use in materials that include, but may not be limited to: printed materials, videos and digital images such as those on the CKKMA website. A minor's last name will never be used in conjunction with any video or digital images.

Member Information

Member Name _____	Date of Birth _____	Age _____	<input type="checkbox"/> F	<input type="checkbox"/> M
Responsible Parent/Guardian(s) if applicable _____				
Address _____				
City _____		State _____	Zip Code _____	
Home Phone _____		Work Phone _____		
Mobile Phone _____		Texting Capability? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Email Address _____				

Providing Updated Information

By mark of my/our initials here, I/we indicate that the contact information listed above is accurate and current. I/we understand that it is my/our responsibility to provide CKKMA with up to date contact information throughout the membership term. By providing contact information, I/we grant permission to CKKMA to contact us via phone, email or text for any reason including, but not limited to announcements, class cancellations and special events.

Emergency Medical Information

Emergency Contact _____	Work/Mobile Phone _____
Note: All of the information in this section will be treated as strictly confidential and will be used only in the determination of the applicant's fitness to participate in martial arts activities with CKKMA and in case of emergency.	
Family Physician Ph #: _____	_____
Dentist Ph #: _____	_____
Health Ins. Provider: _____	_____

List any drug / medication allergies

Any Medical / Physical conditions a medical worker would need to know about?

Medical/Physical conditions that may affect your ability to participate in rigorous activity?

How did you hear about us?

<input type="checkbox"/> Phone Book	<input type="checkbox"/> Recreation Center	<input type="checkbox"/> Sign
<input type="checkbox"/> Drive By / Walk-in	<input type="checkbox"/> Internet	<input type="checkbox"/> Vehicle Advertising
<input type="checkbox"/> Demo / Event	<input type="checkbox"/> Student Referral	

Do you have previous Martial Arts training? If so, explain

What are your reasons for enrolling?

List any other hobbies, sports, interests or skills.

Referral Program

We rely heavily on your referrals. We are very excited to introduce you to our referral rewards program. Any friend or acquaintance, etc. you refer who eventually becomes a member will make you eligible to receive a \$30.00 gift certificate* that can be used to purchase equipment or other items in our proshop or through our catalog merchants. As a new member, we will give you the additional opportunity to receive 50% off your registration today! Just give us the name of four people you plan to approach about our programs and you will receive your discount.

* Homeschool and In-School members are not eligible for the referral program

TERMS OF MEMBERSHIP AGREEMENT

The undersigned agrees to take, and Coastal Kenpo Karate and Martial Arts (henceforth referred to as CKKMA), agrees to teach, karate lessons. The undersigned agrees to use CKKMA's facilities in accordance with the terms printed below. The undersigned understands that under the terms of this agreement, CKKMA, obligates itself to provide competent instructors and suitable facilities for teaching karate lessons. The undersigned hereby represents that he/she or the student(s) they are enrolling are physically fit enough to take the karate course of instruction. The undersigned understands that karate and martial arts training has inherent risk of personal injury, and the undersigned is assuming this risk without liability to CKKMA, its employees, agents, owners or assigns, who shall not be liable for any claims, demands, injuries, damages, actions or causes of action whatsoever.

Additional Terms

1. Monthly payments are due on or before the fifth (5th) of each month. Payments received after the fifth are considered late and must include a \$10 late fee for each week late. After 3 weeks, class privileges will be revoked until payment is received.
2. Hours of operation: Daily except Sundays. Closings listed in the Student and Parent Handbook.
3. Membership will automatically renew for the term selected above if Coastal Kenpo Karate and Martial Arts is not notified in writing of intent to cancel or intent to select other membership terms. Summer Memberships will renew at the month-to-month membership rate unless otherwise specified.
4. Student will abide by terms and conditions identified in the Student and Parent Handbook.
5. Membership is not transferable or assignable without written permission of CKKMA.
6. Personal Property: CKKMA, its employees or agents, shall not be responsible for damaged, lost or stolen articles of clothing or any personal property of a student or guest.
7. Amending of Rules: CKKMA reserves the right to amend the Student and Parent Handbook at any time it may deem necessary to ensure the proper management of the school.
8. Compliance with Rules: Undersigned/Student agrees to obey all CKKMA Rules and CKKMA reserves the right to revoke the membership of any student who does not obey CKKMA Rules as outlined in the Student and Parent Handbook. Warnings will be given in writing and the member agrees to acknowledge these warnings with his/her signature (or if minor, the signature of a parent or guardian.) If a member's membership is revoked for this reason, the member will be required to pay the contract cancellation fee and will not be entitled to any refund of any kind.
9. Hold Harmless: Undersigned agrees to Hold Harmless and Indemnify CKKMA, its employees, agents, successors, owners and assigns from any misuse, excessive force injuries, or damages caused by a student's negligent, reckless, or willful use of karate skill as learned at CKKMA.
10. All memberships require a 30 day notice to cancel, including month-to-month memberships. I/we understand that cancellation fees may apply and I/we agree to pay regardless of reason for cancellation. I/we understand that if legal action becomes necessary to collect fees, I/we will be responsible for all ensuing court costs. Coastal Kenpo Karate and Martial Arts must be notified in writing of any intent to cancel this contract. Any other communication will not be accepted. I/we may deliver such notice to the CKKMA facility located at: 108 Greenland Drive, Suite B. Goose Creek, SC 29445 during posted business hours.
11. If this membership is paid in full, I/we will not be entitled to any refund unless Coastal Kenpo Karate and Martial Arts becomes unable to provide martial arts training within 10 miles from its existing facility. I/we also understand that if this membership is terminated by CKKMA due to the inability to correct documented major student discipline problems, I/we will not be entitled to a refund.
12. Definitions: Whenever used herein, UNDERSIGNED shall mean buyer, student, parent or guardian of student.

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

(Read Carefully Before Signing)

In consideration of being permitted to participate in any way in the martial arts programs offered by Coastal Kenpo Karate And Martial Arts (hereafter referred to as CKKMA) or any other entity utilizing same facilities and/or being permitted to enter for any purpose any restricted area (here in defined as any area where in admittance to the general public is prohibited), the parent(s) and/or legal Guardians of the minor participant named below agree:

1. The parent(s) and/or legal guardians will instruct the minor participant that prior to participating in the classes offered at CKKMA or any event associated with CKKMA, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agree that if at any time I feel anything to be UNSAFE; I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
2. I/We fully understand and acknowledge that:
 - a. There are risks and dangers associated with participation in martial arts training and any classes or events held at or associated with CKKMA and activities which could result in bodily injury partial and/or total disability, paralysis and death.
 - b. The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe.
 - c. These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including but not limited to any and all officials, employees, contractors, spectators, instructors, and owners of and at CKKMA.
 - d. There may be other risks not known to us or are not reasonably foreseeable at this time.
3. I/We HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE CKKMA including its owners, managers, promoters, lessees of premises used to conduct the martial arts training, classes, special events or demonstrations, premises and event inspectors, underwriters, consultants and others who give recommendations, directions or instructions to engage in risk evaluation or loss control activities regarding CKKMA facilities or events held at such facility and each of them, their directors, officers, agents, employees, all for the purpose herein referred to as "Releasee"... From all liability to the undersigned, my/our personal representatives, assigns, executors, heirs and next of kin for any and all claims, demands, losses or damages and any claims or demands therefore on account of any injury, including but not limited to the death of the participant or damage to property, arising out of or relating to the event(s) caused alleged to be caused in whole or in part by the negligence of the releasee or otherwise.
4. I/We HEREBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASE BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
5. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waive, and indemnity agreement is intended to be as broad and inclusive as permitted by law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.
6. On behalf of the participant and individually, the undersigned partner(s) and/or legal guardians for the minor participant executes this Waiver and Release. If, despite the release, the participant makes a claim against any of the Releasees, the parent(s) and/or legal guardian(s) will reimburse the Releasee for any money which they have paid to the participant, or on his behalf - and hold them harmless.

BY MY SIGNATURE BELOW, I ACKNOWLEDGE THAT I HAVE READ AND AGREE TO ALL OF THE TERMS LISTED ON PAGES ONE AND TWO OF THIS MEMBERSHIP AGREEMENT INCLUDING RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT AND TERMS OF MEMBERSHIP AGREEMENT. I CERTIFY THAT I FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT AND INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

SIGNATURE ACKNOWLEDGEMENT

By Mark of my/our signature(s), I/we state that I/we have read the release and waiver of liability, assumption of risk and indemnity agreement. I/we fully understand its terms, and that I/we have given up substantial rights by signing it, and have signed it freely and voluntarily without any inducement, assurance or guarantee made to me/us. I/we intend my/our signature(s) to be complete and unconditional release of all liability to the greatest extent allowed by law. I/we also attest that I/we can obtain a copy of the CKKMA student and parent handbook on the Coastal Kenpo Karate and Martial Arts website and agree to comply with all outlined therein.

Student Printed Name

Student Address

City

State

Zip

Member Signature (Or Responsible Parent/Guardian)

Date

Responsible Parent/Guardian

Date