



After School/Summer Camp Student Agreement

Enrollment Date _____ Start Date _____ Referred by _____

Parent Name _____

Student(s) Name _____ / _____

DOB _____ / _____ / _____ DOB _____ / _____ / _____

For additional students please list name(s) & date of birth on reverse side

Address _____ City _____ State _____ Zip _____

Phone Res. _____ Bus _____ Cell _____

Employer _____ Job Title _____

Address _____ City _____ State _____ Zip _____

D.L. # _____ SS# _____

Spouse _____ Employer _____

Employer's Address _____ City _____ State _____ Zip _____

Job Title _____ Bus Phone _____ Cell _____

In case of emergency notify; _____ Phone _____

Name of Elementary or middle school: _____

PLEASE NOTE: To reserve your place weekly, payment is due on Thursday prior to the week of attendance and will be automatically deducted by your credit card on file. **In the event of nonpayment by due date, I authorize my credit card to be charged for the amount due plus any applicable late fees and/or outstanding balances.**

Initial _____ Type _____ Number _____ Expiration _____

Refer to LTMA new member packet for full list of policies & additional fees.

Payments not received by due date will have a \$10.00 late fee assessed, additionally transportation will be discontinued until payment & all applicable fees are paid in full. _____

A returned check will have a service fee of \$25.00. For the second returned check a \$50.00 service charge will be assessed. Additionally, the above credit card/debit card will be debited for the returned check(s) plus any outstanding fees. _____

Due to limited spacing in transportation and classes, there are no refunds for non-attendance. _____

I UNDERSTAND THAT LTMA IS A MARTIAL ARTS SCHOOL AND NOT A DAYCARE IN AS SUCH, THEIR STOCK-IN-TRADE IS NOT SUPERVISION AND CARE. THE INTENT OF LTMA IS TO TEACH MARTIAL ARTS PHYSICAL AND PHILOSOPHICAL CHARACTER BUILDING SKILLS. I UNDERSTAND THAT LTMA IS A MARTIAL ARTS SCHOOL AND IS A DROP-IN FACILITY IN AS SUCH; MY CHILD(REN) IS FREE TO COME AND GO. ADDITIONALLY, IF MY CHILD(REN) STAY'S AT THE LTMA FACILITY IT IS BECAUSE OF MY DIRECTION AND NOT LTMA. _____

WAIVER & RELEASE: Buyer and Student(s) agree that Student(s) is engaging in physical exercise, the use of equipment, and the use of LTMA training and instruction facility, which can be dangerous to the Student(s) and could cause injury to Student(s). Student(s) is voluntarily participating in these activities and Buyer and Student(s) assume all risks of injury to Student. Buyer and Student hereby waive and release any claim or right to sue LTMA/Level 10 Marketing Group, LLC, employees or agents for injury to Student(s). Buyer and/or Student have carefully read this waiver and release and fully understand, it is a release of all liabilities and damages to LTMA because of any injury that may occur. LTMA will make no evaluation or recommendation whether Student(s) or guests are physically fit for any exercise activities. It is always advisable to consult your physician before undertaking a physical exercise program, particularly martial arts activities. _____

LOSS/DAMAGE/THEFT OF STUDENT'S PROPERTY: LTMA does not assume any responsibility for the loss, damage or theft of any property belonging to the Student and Student agrees that the school and its personnel are not responsible for or liable for any such property even if its loss, damage, or theft occurs on or about the school's facility. _____

All students will be taking their traditional martial arts class with LTMA each day. Should your student show up without a uniform, you authorize LTMA to charge your account on file for \$39.99 + tax for a new uniform. _____

AUTHORIZED SIGNATURE X _____ **Date** _____

PARENTS: IN CASE OF EMERGENCY, PLEASE LIST THE NAMES & PHONE NUMBERS OF ANYONE AUTHORIZED TO PICK UP YOUR CHILD(REN) PLUS ANY ADDITIONAL INFORMATION, ON REVERSE SIDE OF THIS AGREEMENT