

SHELTON BUTOKUKAN KARATE DOJO NEW STUDENT ENROLLMENT FORM



Name _____ Age _____ Date of Birth _____

Parent's Name(s) (if under 18) _____

Address _____

Phone (H) _____ Phone (C) _____ Phone (W) _____

Email _____

Condition of Health: Excellent Good Fair Poor Height _____ Weight _____

Why do you want to join our club? _____

Have you watched a class? _____ Previous Martial Arts training? Style? _____

Employer/School _____

How did you hear about us? _____

Police Record? If yes, please explain: _____

STUDENT ENROLLMENT AGREEMENT

\$60.00 a month...Family Rate is \$30.00 for 2nd family member and \$20.00 for each additional family member.

\$10 per family ONE TIME joining fee

I understand that under the terms of this agreement, the Butokukan Dojo shall furnish me a competent instructor and proper facilities for the teaching of lessons. It is further agreed that my failure to take all lessons contracted for shall not relieve me of my obligations to pay the total tuition herein agreed upon. I further understand that no refunds for any tuition paid shall be made by reason of absence or withdrawal (Students have a period of one year to make up any classes missed because of illness or vacation). I further agree that all exercises and workouts shall be undertaken by me at my own risk and I will not hold Shelton Butokukan Karate Dojo responsible for any injuries that may result. I also will not hold Shelton Butokukan Karate Dojo responsible for any loss, damage or theft of any item personally belonging to me, while at the school or attending any Martial Arts function.

\$60.00 a month...Family Rate is \$30.00 for 2nd family member and \$20.00 for each additional family member.

Student Signature _____ Date _____

Parent/Guardian Signature (if under 18) _____ Printed _____