

# Agreement and Release of Liability

1. I understand that the training which I have registered for and will receive at Palm Beach Martial Arts involves strenuous physical activity and physical contact with the instructors and students. This training may be hazardous and may result in personal injury. The person and guardian (if applicable) whose signature appears below states that he or she has no knowledge of any physical condition that would render these activities dangerous and/or hazardous to his or her health, or the health of his or her ward (if applicable). I voluntarily waive any right or cause of action of any kind, both individually and for their heirs, executors, administrators and successors, arising as a result of taking martial arts lessons at Palm Beach Martial Arts, which any liability may or could be assigned to Palm Beach Martial Arts, its instructors, employees, officers and administrators. **IF YOU UNDERSTAND AND AGREE, PLEASE INITIAL**           

2. I understand and am aware that strength, flexibility and aerobic exercise, including the use of equipment, is a potentially hazardous activity. I also understand that fitness activities involve the risk of injury and even death, and that I am voluntarily participating in these activities and using facilities, equipment and machinery with knowledge of the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death. **IF YOU UNDERSTAND AND AGREE, PLEASE INITIAL**           

3. I do hereby further declare myself to be physically sounds and suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation of use of equipment or machinery except as hereinafter stated. I do hereby acknowledge that I have been informed of the need for a physician's approval for my participation in an exercise/fitness activity or in the use of exercise more frequent physical examination and consultation with my physician as to physical activity, exercise and use of exercise and training equipment so that I might have his recommendations concerning these have been given my physician's permission to participate, or that I have decided to participate in activity and use of equipment and machinery without the approval of my physician and do hereby assume all responsibility for my participation and activities, and utilization of equipment and machinery in my activities. **IF YOU UNDERSTAND AND AGREE, PLEASE INITIAL**           

List any condition, impairment, disease, infirmity or other illness that would prevent your martial arts training, use of equipment, or machinery:

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This agreement shall be binding upon the undersigned, his/her heirs, executors, administrators, and assigns.

  X    
\_\_\_\_\_  
Parent, if under 18 / Student Signature

\_\_\_\_\_  
Date

# Palm Beach Martial Arts and Fitness, llc

6250 Lantana Rd. #19 - Lake Worth, Fl. 33463 - (561) 439-1600

## Membership Agreement

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applications with respect to any aspect of a credit transaction on the basis of race, color, religion, national origin, sex, marital status or age (provided the applicant has the capacity to contract). The agency that administers compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Washington, D.C. 20580

Last Name	First	Cell Phone ( )	Home Phone ( )
Street Address	City	State	Zip
Email Address			

School Location Code: \_\_\_\_\_ New ? Renewal ? Upgrade ?

- Total Annual Tuition amount is \$ \_\_\_\_\_
- Your Down Payment \$ \_\_\_\_\_
- The amount to be financed is \$ \_\_\_\_\_
- Your payment schedule will be:

Payments are due each month on:	Number of Monthly Payments	Amount of Monthly Payments	First Payment Due Date

**I understand that tuition is based on an annual amount.** I also understand that this is a binding contract and that if the entire year's tuition is not paid in full, the remaining balance may be paid, at Palm Beach Martial Arts' sole discretion, over an agreed upon number of monthly payments as described above.

Fees are NOT based on a class-by-class or week-by-week basis. Classes missed may be made up but will not effect monthly payment terms. There are no refunds or pro-rating for missed classes. In return for payments, Palm Beach Martial Arts agrees to provide qualified instructors.

### EFT Authorization

I, \_\_\_\_\_, authorize Palm Beach Martial Arts & Fitness, llc to initiate Automatic payments by the method indicated and post it to my account: (Check One) Checking ? Savings ? MasterCard ? Visa ? Amex ?

I understand that I am in full control of my payment and if at any time I decide to discontinue this form of payment, I will notify Palm Beach Martial Arts of a new payment method in writing, a minimum of three (3) days prior to my contract due date. Your information is safe. Palm Beach Martial Arts does not keep any copies of any payment related information. Once entered into our secure payment processing software, your information cannot be accessed. Buyer is responsible for all Service Charges for any returned check, EFT, or credit card.

\_\_\_\_\_  
School Representative

\_\_\_\_\_  
Buyer's Signature

School Use Program: \_\_\_\_\_ Plan: \_\_\_\_\_/\_\_\_\_\_ Start-Date: \_\_\_/\_\_\_ Auto ? # Days per Week: \_\_\_\_\_  
Ad Source: \_\_\_\_\_ Notes: \_\_\_\_\_