

Concho Valley Martial Arts Center

Your **ULTIMATE** Martial Arts Experience

4001 Sunset Dr. Ste. 1262 325-650-0486 San Angelo, TX 76904

Master Frank Galindo III – VIII Dan ITF TaeKwon-Do; II Dan TaeYu-Do

CONTRACT FEES

1st MONTH - \$129 + Uniform Fee Then Select Your Contract Term

MONTH-TO-MONTH

\$139/Mo

SIX MONTH

\$109/Mo

SIX MONTH (Paid)

\$594

Sr's 65+

\$89/Mo

Super Seniors 70+

\$79/Mo

Military (Active)

\$109/Mo

Uniforms: Student...\$75/\$90 Black Belt...\$100 to \$150

___ Monthly (\$139) ___ Six Month (\$109/MO) ___ Six Month (Pd In Full)

Sign-Up Date: _____

_____ CONTRACTS RENEW AUTOMATICALLY. Upon Completing Your Term, You Can Cancel Your Contract With A 15 Day Notice To Avoid Cancellation Fees.

Name: _____ DOB: _____ Age _____

Circle One: Male. Female Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ Alternate Phone: _____

VALID Billing Email Address: _____

VALID Alternate Email Address: _____

Payer Name: _____ Address: _____

Payer Phone: _____ Alternate Ph: _____

OTHER APPLICANTS

Name: _____ DOB _____ Age _____ M F
LAST FIRST MI SEX

Name: _____ DOB _____ Age _____ M F
LAST FIRST MI SEX

USE BACK OF FORM FOR ADDITIONAL APPLICANTS IF NEEDED

Emergency Contact: _____ Relationship: _____

Primary Phone: _____ Alternate Phone: _____

Person(s) Prohibited From Picking Up Your Child? _____ Why? _____

How did you hear about us? _____

Why train at CVMAC? _____

Previous Training/Rank? _____

Health Issues/Medications? _____

WAIVER OF LIABILITY

By my/our application to Concho Valley Martial Arts Center (CVMAC), and by the signature(s) below, I agree to follow all rules and regulations as outlined and updated by CVMAC and any Affiliate Organizations. I am aware of, and accept any and all risks of injury inherent in Martial Arts training, and I release and hold harmless from any and all indemnification, any CVMAC or Affiliate Group Official, Instructor, Trainer, Parent, or Guest, whether directly or indirectly involved with CVMAC, from any injury that I/we may incur while training or practicing of any Martial Art, Discipline, or Training Regimen, at this or any affiliate location.

Applicant Signature (Parent Signature if Applicant is a Minor) _____ Date _____

DISCLOSURES AND ACKNOWLEDGEMENTS

Social Media

Concho Valley Martial Arts Center (CVMAC) may post and publish photos of you/your student(s) on Social Media sites (Facebook, Twitter, Instagram, etc/), on the Band messaging App, and/or on the CVMAC website (www.mytkdrox.com). CVMAC limits the identity of you/your student to first names.

_____ **By my initials, I acknowledge that CVMAC may post/publish photos of me/my student(s) for promotional purposes, via social/other media, without any remuneration.**

_____ **NO, CVMAC MAY NOT POST/PUBLISH ANY PHOTOS OF ME/MY STUDENT**

BAND Messaging App

CVMAC uses an App called "BAND" to post Studio information and Updates. "BAND" **MUST BE ADDED** to your Electronic Device in order for you to be included on Band. Once on BAND, you will have access to all BAND notices/posts. Student's full names may be used on BAND.

_____ **By my initials, I agree that I will download BAND to my Electronic Device so that I may have access to the BAND notices/posts about Studio news/updates. Membership In The BAND APP Is Dissolved upon CANCELLED OR DISCONTINUED Membership to CVMAC.**

_____ **NO, DO NOT INCLUDE ME ON THE BAND APP**

INVOICING, CONTRACT AND CANCELLATION DISCLOSURES

- _____ Electronic Invoices are sent to the Email address on the Registration page.
- _____ An Invalid Email address nullifies this agreement and the full contract payment becomes due.
- _____ A Late Fee applies if fees are more than **THREE DAYS** late, as outlined below.
- _____ Unpaid Invoices continue to accrue Late Fees.
- _____ Invoices over two weeks late are **SUBMITTED TO COLLECTIONS for the Unpaid Balance.***
- _____ Class fees are due during scheduled closures and/or personal time, i.e. holidays/vacation.
- _____ Contract Terms **Automatically Renew** After the Initial Term unless 15 day notice is given.
- _____ Changes to this contract **MUST BE SUBMITTED IN WRITING/E-MAIL** to become effective.
- _____ Future revisions/modifications to this contract are implied to be understood and accepted.
- _____ ***A Cancellation Fee is the balance of the unpaid Contract PLUS 10%.**

FEES DUE DATE

_____ My fee of \$_____, is **due** on the (circle one) **3rd, 10th, 17th, OR 24th of each month**, depending on my sign-up date. **LATE FEES apply** as indicated below:

_____ Single sign-up...\$15 _____ Double sign-up...\$25 _____ Family Sign-up...\$35

_____ **I have enrolled in a _____ month contract term.**

****NOTICE**NOTICE**NOTICE**NOTICE**NOTICE**NOTICE****

_____ **I understand that CVMAC offers extensive training in several Martial Arts which involve ACTUAL CONTACT in a controlled environment. Precautions are taken to minimize risk of injury. I understand and accept these risks involved in training.**

By my/our signature below, I acknowledge that I MUST SUBMIT A FIFTEEN (15) DAY NOTICE TO CANCEL MY MEMBERSHIP to avoid Late Fees and/or Cancellation Fees as stipulated in this agreement. Failure to provide a 15 DAY NOTICE OF CANCELLATION will result in CANCELLATION FEES (the UNPAID BALANCE PLUS 10%), plus any LATE FEES assessed to my account. I understand that my account will be TURNED IN to Collections, and that my credit rating may be affected if I/we fail to fulfill this contract. By my signature below, I acknowledge that I have read, accepted and understood all the terms and conditions of membership at CVMAC.

Applicant (Parent Signature if applicant is a minor)

Date