

Card ____ Coupon ____ Checked ____



Trial Class _____
Day _____
Time _____
Date _____

Part A: General/Billing Information

Contact Name: _____ Relation to Student: _____

Home No. _____ Cell No. _____ Work No. _____ Email: _____

Contact Name: _____ Relation to Student: _____

Home No. _____ Cell No. _____ Work No. _____ Email: _____

Address: _____

City _____ State _____ Zip _____

Referred By
Phone Book Newspaper Radio TV
Present Member _____
Other _____

Part B: Student Information (only if different that contact information)**

Name of Student: _____

Gender _____ Child's D.O.B _____

Name of Parent or Guardian: _____

**Address _____ *City _____

**State _____ **Zip _____ **Email _____

Learning Objectives
Sport Self-Defense Self Discipline
Physical Conditioning Self Confidence
Recreation Weight Control
Other _____

Medical/Physical Conditions - alert for instructor: _____

Release of Liability. I understand that strict observation by me, of the rules and regulations of America's Best Kids including the use of protective equipment, will largely eliminate the possibility of accident or injury, and I hereby represent that I am physically fit to take the prescribed course of instruction and that I have had an opportunity to observe and/or participate in lessons prior to the signing of this agreement. I have chosen and voluntarily agree to use the facilities, equipment and resources provided by America's Best Kids at my own risk with knowledge of the risks involved. I further understand and agree that I release from liability and waive any and all claims or actions for personal injury or death or property damage or loss against America's Best Kids, its owners, officers, operators, employees and affiliated persons, whether caused by the fault, negligence, omission, or any other act however caused, of America's Best Kids.

I have read and understand the above: _____ (If not 18 must be signed by parent or guardian)

Part C: Enrollment Agreement (To be filled out by office)

The undersigned hereby agrees to take and America's Best Kids hereby agrees to teach, a program titled _____.
Program session/monthly course beginning date: _____ (Day of the week: M T W Th F S / Time _____)

TUITION

- A. Monthly Fee / Course Fee \$ _____
- B. Prorated Fees \$ _____
- C. Registration Fee \$ _____
- D. Training Materials / Misc. \$ _____
- E. Discount/Coupon/Credit \$ _____
- F. **Total** \$ _____
- G. Initial Payment \$ _____
- H. Unpaid Balance \$ _____
- I. Number of Installments _____

Electronic Funds Transfer Authorization:

The funds for the monthly payments shall be debited from my:

Name on Credit Card _____

Credit Card No. _____

Type of Card: Visa MC AmEx Disc

Expiration Date _____ Card Code _____

Date _____ Init. _____

Billing Address: (If different from above)

I understand and agree to pay America's Best Kids monthly payments of \$ _____, with the first payment due on the 1st of _____, 20_____, and subsequent payments on 1st day of each consecutive month thereafter, until payments for the course as described above is completed or until I terminate this agreement.

I understand that under the terms of this agreement America's Best Kids obligates itself to furnish me with competent instructors and suitable facilities for teaching the lessons. All classes are supervised by qualified personnel. Lessons are not conducted on Sundays, national holidays, or examination days.

Being a student of the facilities operated by America's Best Kids, I will comply with all the rules and regulations of the programs. Failure to take the lessons in the allocated time, without written approval from America's Best Kids invalidates the lessons beyond the expiration date.

Health Information

Insurance Company _____

Policy Number _____

Name of Insured _____

Medical Conditions: _____

Medications: _____

Emergency Contact (other than parent or guardian)

Name (1) _____

Relation _____

Phone No. _____

Alt. No. _____

Physician's Name _____

Phone _____

Medical Authorization: I hereby authorize the staff of America's Best Kids to act for me according to their judgment in any emergency requiring medical attention, and hereby waive and release the school and its staff from any and all liability for injuries or illness incurred while in the school. I have no knowledge of any physical impairment that may affect the above named student participation in the program and have read and understand the terms and conditions outlined in the accompanying material including the membership agreement.

X _____ (If not 18 must be signed by parent or guardian)

Part D: Agreement

Cancellation. I understand that I may cancel this agreement without any penalty or further obligation within three business days after the date of this agreement, excluding Sundays and holidays. After three days, I may cancel this agreement at any time with a (1) calendar month advance notice, unless I have a Tuition Contract. Notice of cancellation shall be in writing and mailed to America's Best Kids, 1914 Skypark Drive, Medford, OR 97504. All students are considered enrolled in the program until notice is given regardless of attendance. X _____

- At anytime during the agreement term, a consumer may cancel:
 - 1) If the buyer dies or becomes physically unable to use a substantial portion of those health spa services used by the buyer from the date of the agreement until the time of disability;
 - 2) If the health spa goes out of business;
 - 3) If the health spa moves its facility closest to the residence of the buyer on the date of the agreement to a location more than five additional miles from that residence;
 - 4) If a facility, construction or improvement is not completed by the date represented in the agreement;
 - 5) If the health spa materially changes the health spa services promised as part of the initial contract;

When consumers cancel for any of the five reasons listed in the agreement, the health club must provide a refund based on the calculation of dividing the contract price by the number of weeks in the agreement term and multiplying the result by the number of weeks remaining in the agreement term.

Photo Release. I do hereby give America's Best Kids the irrevocable right to use picture or photograph in all forms for display or advertising or any other lawful purposes. X _____

Returned Check Fee. I understand that I will be charged a returned check fee of \$25.00, and when applicable, a late charge as well.

Late Fee. If monthly payment is more than 5 days past due, a late fee of \$5.00 will be charged. In the event an account is more than 30 days past due a 10% penalty on the entire amount due will be assessed. (late fees accrued on a monthly basis)

Make-Ups: All make-up classes must be made up within 14 days of the missed class. A cancellation must be made ahead of the missed classes in order to schedule a make-up. Make-ups are for registered students only and may not be substituted for tuition. If scheduled make-ups are missed, those classes are forfeited. If a make-up is not available, you may request an open gym pass which must be used within 30 days of missed class. Make-ups are not scheduled for holiday closures. Number of classes in a month may vary, however all courses are based on a 4 week month per annum (i.e. one month you may have 3 classes and in a subsequent month, you would have 5). *Swim classes do not have make-ups; an open swim pass will be issued for the student which expires within 30 days of the missed class.

Testing Fees. In order to cover the costs of registration, promotion, issuance of certificate and new belt, a testing fee is charged at each examination.

Supplemental Programs. Training Supplements, private lessons, special programs, seminars, and special events are considered to be non-refundable, unless otherwise specified.

Equipment / Supplies. Students need to furnish their own equipment and / or supplies. These items may vary by both program and level.

Tuition Contract. By initialing the line below, I understand that I have a tuition contract and am committed to paying for the above time period and amount. X _____

Late Pick Up. If a student is not picked up immediately after his/her class, a charge of \$10 will be applied to your account and \$1 a minute for every minute after the first 10 minutes. X _____

Entire Agreement. This agreement sets forth my entire agreement and supersedes any prior agreement.

Annual Membership Fee. All students annual membership fees will entitle them to member rates on programs and promotional events regardless if actively enrolled in a program

Part E: Signature I agree to the terms of this agreement: _____ Student/Parent/Guardian