## Aikido of Champlain Valley Application Form Youth (6 to 12 years old)

Today's Date:	Date of Birth		
Student: (Last)	(First		
Parent/Guardian 1: (Last)	(First)		
Parent/Guardian 2: (Last)	(First)		
Home Address: (Street)	(City)	(State)	(Zip)
Main Phone: (Area) (Number)	2 <sup>nd</sup> Phone: (Are	ea) (Number)	
Email 1:	2 <sup>nd</sup> Email:		
(Note: Email is the primary means by which we disse	minate information about the dojo, including	invoices for your practice fees.	
<b>Emergency Contact Information</b>			
Name:	Phone Number:	Relationship:	

## **Background Experience and Health Issues**

Aikido is a strenuous martial art, does your child have any injuries or limitations we should be aware of?

How did you learn about our dojo? What influenced your decision to join?

## **Liability Release**

I,

(Parent/Guardian)

\_\_\_\_\_, hearby enroll my child for instruction at Aikido of Champlain Valley and agree to the following terms and conditions:

1). I am seeking instruction in Aikido for my child and I understand that it involves strenuous exercise.

2). I understand that infraction of safety rules or disrespect to instructors by my child will result in an immediate termination of his/her practice at Aikido of Champlain Valley.

3). As a condition of my attendance and participation, I agree to release all claims of liability for injury, damage, or loss related to practice or instruction while training as a student at Aikido of Champlain Valley.

4). My signature below indicates that I understand that the practice of Aikido accompanies a degree of risk, and that I enroll my child willingly.

Signatures:

Parent/Guardian	Date:	
Student	Date:	

Aikido of Champlain Valley does not discriminate on the basis of race, color, age, gender, and sexual orientation, national or ethnic origin in our educational or admissions policies. We are a 501(c)(3) non-profit educational institution.

## Financial Agreement with Aikido of Champlain Valley (ACV)

There are four ways to make payments for your practice: 1) ACH, 2) Cash, 3) Check, 4) Credit Card. The Dojo's policy requests that everyone use its automatic withdrawal system (described as "ACH") because it greatly simplifies our accounting system. We use your bank's routing and account number to withdraw your monthly fees, which are due the 10<sup>th</sup> of each month. For those that choose this payment plan, we offer a 10 dollar discount on your monthly fees. Of course, you can pay your fees with cash, check, or credit card if you prefer.

The table below displays the Dojo's fees for practicing Aikido, which include discounts if family members practice with you. We offer a 3 month introductory special to help get you started, which gives 3 months of practice for the price of two. Regular monthly fees are paid after the time your initial special fee coverage expires.

Youth Fees	ACH	Cash / Check / Credit Card	Description
3 Month Intro Special	\$150.00	\$170.00	(33% price reduction)
Reg Monthly Fee	\$75.00	\$85.00	(Reg price)
Monthly 2 family members	\$67.50	\$76.50	(10% reduction)
Monthly 3 family members	\$60.00	\$68.00	(20% reduction)
Monthly 4 family members	\$56.25	\$63.75	(25% reduction)

Below, we ask you to clarify which payment plan you will use to pay for your aikido practice. Please fill out the appropriate amounts, payment type, and dates. Ask for help if you have questions.

Start Practice Date: / /								
How will you pay for your initial practice fees?								
Choose one option	Amount		ACH	Cash	Check	Credit Card		
Intro, 3 Month Special	\$		Ο	Ο	0	О		
Intro, Reg Monthly Fee (No Special)	\$		Ο	Ο	0	0		
Fees begin with the start of each month. If you start practice <b>before</b> the 15th of a month, then your intro fees begin with that month. If you start after the 15 <sup>th</sup> of a month we apply your intro fees to the beginning of the next month. However, we prorate the weeks before your intro fee starts at \$20/week.								
Prorate month if start after 15th	\$		О	0	Ο	О		
You will need a Gi-our practice uniform. You can purchase one from the dojo or from the internet.								
Gi (if purchased from Dojo)	\$		Ο	Ο	0	О		
<b><u>GRAND TOTAL INTRO</u>:</b> \$ Pay this amount to begin practicing.								
When the time period for your intro-payment is over, how will you pay for monthly practice fees?								
<b>Regular Practices Fees begin</b> :								
Discount if applicable (multiple family, student, military, special circumstance):								
Amount for Reg Fees:	\$		Ο	0	0	Ο		
ACH payment plan, please tape a voided check to the top of this application or fill in the information below:								
Bank NameRouting Number			ımber	ber Account Number				

Finally, consider making a monthly donation to support our Samurai Youth Program. We provide financial assistance to students who otherwise could not afford Aikido practice.							
Monthly Donation	\$	/Month	О	О	0	О	

Name of Intake Person: