



MARTIAL ARTS SUMMER KARATE DAY CAMP REGISTRATION

850 Taraval S.F. CA 94116 Tel (415)731-9988 Fax 707-6688 www.onemartialarts.com

name _____ age _____ dob _____ male ___ female ___
address _____ city _____ state _____
zip _____ home phone _____ phone _____ cell _____
e-mail _____

karate class enrolled in (time & date if applicable) _____

Is watching Prescreened DVD's okay in aftercare? Yes ___ No ___ How did you hear about us? _____

RELEASE of LIABILITY

I understand that ONE MARTIAL ARTS, their instructors, staff and other session participants are not responsible or liable for accidents and/or injuries to said mentioned child, nor loss of any personal property during a session(s) and while under their instruction/supervision on the premises at 850 Taraval, San Francisco, CA. 94116 and off-site locations. I will not hold ONE MARTIAL ARTS, its KARATE DAY CAMP program or any of their instructors/staff liable for any accidents, injuries or loss of personal property that may occur to said mentioned child.

I have read, understand and accept all conditions written under said release of liability.

parent/guardian signature _____ date _____

name (please print) _____

EMERGENCY CONTACT

name _____ tel. _____
alt. tel. no. _____ cell _____

2nd contact _____ tel. _____
alt. tel. no. _____ cell _____

MEDICAL INFORMATION

Type of Insurance _____ Policy No. _____

Primary Care Physician _____ tel. _____

*Closest Preferred Hospital _____

Any special needs? (Medications, allergies, behavioral issues, etc.) _____

(*In the event of an emergency, our staff will either call 911 and/or take your child to the nearest emergency center.)

Fees

\$325 Per Week / \$70 Per Day

Book 3 weeks or more

and receive 10% off weeks 4, 5, etc.

Discounts do not apply to daily rates.

Rates apply to regular day camp hours (7:30 am - 6:00 pm)

ONLY. You will be charged a late fee of \$5
per every 5 minutes after 6:00 pm.

CHECK (Payable to One Martial Arts)

VISA MASTERCARD AMERICAN EXPRESS

CARD NUMBER _____ EXP DATE _____

AUTHORIZED SIGNATURE _____

	Amount	Date Paid
Week 1 June 8th	_____	_____
Week 2 June 15th	_____	_____
Week 3 June 22nd	_____	_____
Week 4 June 29th	_____	_____
Week 5 July 6th	_____	_____
Week 6 July 13th	_____	_____
Week 7 July 20th	_____	_____
Week 8 July 27th	_____	_____
Week 9 Aug 3rd	_____	_____
Week 10 Aug 10th	_____	_____
Week 11 Aug 17th	_____	_____
Week 12 Aug 24th	_____	_____

Karate Uniform \$55 + tax
FREE when booking 4 weeks

Total Amount Due: _____

ABSOLUTELY NO REFUNDS - NO EXCEPTIONS