

Yuba City Martial Arts Membership Agreement 430 North Palora Avenue

430 North Palora Avenue Yuba City, CA 95991 (530) 418-8283 YCMartialArts.com

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Payee/ Parent/ Guardian	First Name Phone Number				Last Name Email address				
Emergency Contact	First Name Phone Number				Last Name Relationship				
Student(s) (IF different from above or minors under 18yrs of age)	First Name First Name			Last Name		Age	_		
				Last Name			Age Age	_	
Membership Plan	Contract Length			Cost: \$120 Per Studer					
	Prepay Packages					Discounts			
	Quarterly Semi-Ann Save \$30 Save \$6		-Annual	Annual Save		Buddy Up 10% (all memberships)		Teaching (Variable)	
	 I, the undersigned, authorize Yuba City Martial Arts and/or its agents to withdraw or debit the listed Membership Fees from the account/credit card provided on the 1st of each month. Late fee of \$15 will be applied to invoices not paid in full within 10 days of invoice receipt. Payments will remain at the listed price and shall be charged at the specified frequency for the specified contract length, or I terminate this Agreement by written cancelation. By signing this Membership Agreement, I agree to assume all risks and expenses due to an injury that may occur in my/my student's participation at Yuba City Martial Arts. I agree to hold Yuba City Martial Arts or anyone acting on its behalf, harmless in the event of an injury to myself/my child while participating under the above supervision. 								
	Parent/Guardian Signature:				Date:				