



Welcome to Bozeman Karate!

We provide professional, affordable karate instruction for you and your entire family. We do not charge initiation fees or contracts. We offer family, senior and corporate discounts.

Karate is a year-round activity and billing is based on a calendar year as well. While there may be times we close throughout the year for holidays and other events, the monthly fee is based on a yearly fee divided by 12, and therefore does not change from one month to the next.

Please review the following policies concerning our tuition billing:

1. We accept automatic payments on either the 1st or the 15th of every month as well as punchcards. The punchcards must also be setup for automatic payment and will be charged for each class the student attends.
2. We accept Visa & Mastercard Credit and Debit cards.
3. We apologize, but we no longer accept EFT transactions.
4. All cancellations require a written notice and must be received 30 days prior to intended termination date.
5. Delinquent accounts will be charged 10% charge if not remediated within 10 days of the billing date.
6. There will be a \$40 returned check fee on all insufficient funds returned checks.
7. You may put your account on hold for a total of 90 days per calendar year. A hold fee does apply and may not be done retroactively.

I acknowledge that these guidelines are part of my tuition plan.

Signature: _____ Date: _____

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Office Use Only:

Auth:	Date:	EI:
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Bozeman Karate Annual Holiday & School Closure Schedule

New Year's Day – January 1

Memorial Day – Last Monday in May

Independence Day – July 4

Labor Day – 1st Monday in September

Thanksgiving – 4th Thursday + Friday in November

Christmas Break – One week in December around Christmas. Exact dates will be determined each year.

These are subject to change. Classes that are missed because of a holiday closure can be made up by attending other classes that are offered for the student's age and belt level within the month of the school closure. Any changes to the Holiday School Closure schedule will be sent to the membership prior to the month in which the change will occur.

I acknowledge that this closure is part of my payment and that any closure of the school due to the above holidays does not entitle me to a refund of any kind, partial or complete.

Signature: _____ Date: _____

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Bozeman Karate Non-Minor Participation Waiver

_____ I understand that the practice and participation in fitness training, martial arts, and/or self-defense may require vigorous physical activity and involves the risk of personal injury; Having recognized the same, the undersigned hereby acknowledges awareness of the risks therein, and does certify that s/he is physically capable of performing the same, has not been otherwise informed by a physician or other healthcare provider, and knows of no restrictions that would prohibit or prevent him/her from participating in the practice and training of these programs.

Therefore the undersigned assumes all risks in connection therewith for any injury, harm, or damage that may occur to his/her self while engaged, and does fully release and hold harmless, Bozeman Karate LLC, or any agent, employee, representative, independent contractor, singly and collectively, from any and all claims, liability, damages, or causes of action by the undersigned and his/her family, heirs, estate or assigns as the result of any injury, harm or damage sustained at any time hereafter as a result of his/her participation in the practice and training of the aforementioned programs.

Student Signature: _____ Date: _____

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Bozeman Karate Minor Participation Waiver

____ I understand that participation in martial arts & self-defense classes at Bozeman Karate, LLC poses a possible inherent risk of injury (minimal to severe, including death). I hereby assume all risks associated with participation in martial arts at Bozeman Karate, LLC, its members, instructors, assistant instructors, and employees harmless from any and all liability that may arise in connection with my participation or my child's participation in the programs.

____ I hereby certify that I/my child/my ward are in good health and have/has no physical limitations that would preclude participation in martial arts activities.

____ I certify that I/my child has health, accident and liability insurance to cover any bodily injury or property damage that may be caused or suffered while participating in martial arts or else I agree to bear the costs of such injury or damage to me/my child. I further certify that I am willing to assume the risk of any medical or physical condition I/my child may have or am willing to assume and bear the costs if all risks that may be created, directly or indirectly, by any such condition.

____ Further, I hereby voluntarily release and forever discharge and agree to hold harmless and indemnify Bozeman Karate, LLC and its members, instructors, assistant instructors, employees, students, successors, lessors, insurers, and representatives from any and all liability, claims, demands, causes of action or rights of action for injury or damage resulting from my participation or my minor child's or ward's participation in Bozeman Karate, LLC martial arts programs or the use of Bozeman Karate, LLC equipment and facilities. This waiver is binding on my assigns, successors, heirs, spouse, parents, administrators, guardians, insurers and legal representatives.

This waiver of liability is the entire, complete, sole, and only understanding and agreement by and between the undersigned and Bozeman Karate, LLC pertaining to the above discussed matters.

Student Signature: _____ Date: _____

Parent/Guardian: _____ Date: _____

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Bozeman Karate Photo Release

I hereby grant Bozeman Karate, LLC permission to use my or my child's likeness in a photograph, photographs or video recordings in any and all of its publications, including website entries and promotional materials, without payment or any other consideration. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photograph, photographs or video recordings. I understand and agree that these materials will become the property of Bozeman Karate, LLC.

Student Signature: _____ Date: _____

Parent/Guardian: _____ Date: _____

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Bozeman Karate Lil' Dragons Qualifications

As parents and coaches we understand all children develop at different rates both physically and mentally. We are proud to offer classes starting at age 4 for Lil' Dragons provided your child is ready for the challenges of the class.

This is based on the ability to:

1. Follow verbal instructions
2. Be fully toilet trained
3. Respect others' space

We are excited to share our love of karate with your child and know the importance of it being the right time for your child as well.

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Bozeman Karate Student Information Sheet

Today's Date _____ Karate State Date: _____

Student Name: _____ Date of Birth: _____ Gender: M F

If under 18:
Parent(s) / Guardian(s) Name(s) _____

Mailing Address _____

State _____ Zipcode _____ Phone _____

Email: _____

Emergency Contact _____ Phone: _____

Previous Martial Arts Experience _____

Gi Size _____ Current Rank _____

Have you ever been arrested? Yes No If yes, please explain: _____

Physical/Mental Limitations & Allergies: _____

Are you on medication? Yes No If yes, to treat what: _____

Behavioral Issues: _____

How did you hear about us? Facebook Instagram Print _____ Google

Referred by: _____

****Bozeman Karate, LLC reserves the right to refuse instruction at the discretion of the school management.****

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