

# AFTER-SCHOOL STUDENT ENROLLMENT FORM

## SECTION 1: STUDENT INFORMATION

2016 / 2017 School Year

Name _____	DOB ____ / ____ / ____	
Address _____ St. _____ Zip _____		
Age _____	Grade _____	Name of Sibling Enrolled _____
Allergies Yes / No _____		
Notes _____		

## SECTION 2: PARENT/GUARDIAN INFORMATION

Name _____	Relationship _____
Address <small>If different than child</small> _____	
Home Phone _____	Cell Phone _____
Work Phone _____	Email _____
Place of Employment _____	
Notes _____	
How Did You Hear About A.S.K.? (for example, website, school flyer, friend or drive by)	
_____	

Name _____	Relationship _____
Address (if different than child) _____	
Home Phone _____	Cell Phone _____
Work Phone _____	Email _____
Place of Employment _____	
Notes _____	

### SECTION 3: SCHOOL INFORMATION

School Name \_\_\_\_\_

Teacher's Name \_\_\_\_\_

Academic Notes \_\_\_\_\_

### SECTION 4: DAYS STUDENT ATTENDING AFTERSCHOOL PROGRAM

Entire Week: Yes / No

Partial Week (circle days attending) Monday Tuesday Wednesday Thursday Friday

### SECTION 5: ADDITIONAL PEOPLE AUTHORIZED TO PICK UP STUDENT

**Identification will be required if person other than parent is picking up student and must be at least 18 years of age**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email \_\_\_\_\_

### SECTION 7: EMERGENCY CONTACT INFORMATION

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address (if different than child) \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Email \_\_\_\_\_

Notes: \_\_\_\_\_

**SECTION 8: MEDICAL INFORMATION**

Current Health Issues \_\_\_\_\_

Medications \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Health Insurance \_\_\_\_\_

Policy # \_\_\_\_\_

Notes \_\_\_\_\_

**SECTION 10: SIGNATURES**

\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_-\_\_\_\_

**PARENT/ GUARDIAN SIGNATURE**

\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_-\_\_\_\_

**PARENT/ GUARDIAN SIGNATURE**

**PAYMENT INFORMATION**

**EFT: withdraw from checking account, please attach voided check**

Bank Name: \_\_\_\_\_

**Payment via Credit Card**

MC / Visa Acct No. \_\_\_\_\_ Exp. \_\_\_\_/\_\_\_\_ Security Code \_\_\_\_\_

I hereby authorize the amounts indicated above to be withdrawn from my checking account or charged to my credit card account listed above and acknowledge the payments herein are due whether I use the services at American Sports Karate or not. I also understand and agree that if I choose the monthly payment option and for whatever reason stop making the scheduled monthly payments, the total remaining balance becomes due and payable immediately.

**Print Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

x \_\_\_\_\_

x \_\_\_\_\_

## PRICING POLICIES

Uniform – No charge upon enrollment. Additional uniforms available for \$45

Registration Fee \$0

Enrollment 2:50 to 6:00 pm Monday through Friday **\$96.00/week**

When school is dismissed early, 11:50 to 6:00 pm, additional fee **\$15/day**

When school is closed all day, 8:00 am to 6:00 pm, additional fee **\$30/day**

Daily Rate: We offer a daily rate of **\$30/day**. This provides for non-guaranteed enrollment and will be superseded by an interested full time student if there is no other space available.

Sibling Discount: members enrolled in the American Sports Karate After School Program on a full time basis receive a **10% discount** for weeks both siblings attend.

## A NOTE ABOUT THE UNIFORM

The (gi) uniform is to be treated with respect. This shows unity and pride in our school and oneself. The uniform should be kept clean and neat at all times. Be sure to put your child's name on the inside waistband of the pants and on the inside collar of the top. An A.S.K. patch must be affixed to the gi in order for the student to participate in martial arts classes or tests.

## TESTING FEES AND EQUIPMENT

As in any sport, there are equipment and uniforms to purchase. Karate is no exception! Every 3-4 months, depending on your child's skills and level of preparation, there will be a belt testing. In order to be eligible to test, you must pay the testing fee at least one session prior to your child's testing date; the testing fees start at \$45.00. Also, as your child progresses in the sport there is additional equipment necessary to participate in the kumite (sparring) portion of karate. A student must start sparring prior to and as a condition of advancing to the Blue Belt level.

## PAYMENT AND PICK UP INFORMATION

1. Upon registration to the program, payment for the first week is due to guarantee the space. Automatic payments are processed on Friday prior to the upcoming week. Method of payment is via automatic payments with approved credit card or EFT check withdrawal.
2. **Pick up time for the after school program is 6:00 p.m.** If you are going to be later than 6:00 p.m., please call American Sports Karate at 239-643-2275 (South) or 239-260-7451 (North). There will be a late pick up fee of \$20 starting at 6:15 and \$1 per minute thereafter for each child. We do not offer extended pick up times beyond 6:00 pm. Late fees will automatically be charged to whatever form of payment is on file for your account.

## PARENT'S RESPONSIBILITIES

1. You must sign your child out of the after school program daily!
2. Please notify your school that American Sports Karate's After School Program will be picking up your child from school.
3. If your child does not go to school because he/she is sick, etc., you **MUST** notify us as soon as possible so that we can notify our drivers. It is a significant problem if we attempt to pick up a child and they are not at school. We cannot just leave without ascertaining the whereabouts of the child and that causes unnecessary delays in our schedule and concern for our drivers.
4. Payments are made in advance for the upcoming week of after school care.
5. There will be no adjustments, refunds or credits for individual days not attended. We operate as a fulltime program regardless of the number of days attended by a student.
6. There will be no adjustments, refunds or credits for absences due to illness or any other reason without a minimum of **two weeks notice**. **This notice must be submitted in writing** to [dmoore@americansportskarate.com](mailto:dmoore@americansportskarate.com). This will ensure there is no misunderstanding regarding when and if a notice has been given. Verbal notice is not acceptable. We schedule, plan and staff for a specific level of attendance and without adequate and formal notice, we incur the cost

of providing after school care for your child whether they attend the program or not. Additionally, if your child does not attend our after school program and we do not receive proper notice in advance; we have no opportunity to fill their spot with another paying customer. This is why we require a minimum two weeks written notice for any refunds or credits. We appreciate your understanding and cooperation.

7. Check our lost and found weekly if your child has lost any items.

8. Please write your child's name on the inside waistband of the pants and the collar of their uniform. All equipment and belts must also be marked. A.S.K is not responsible for lost items.

9. **If you wish to cancel the program, we require two weeks' notice, no exceptions.**

## RULES FOR STUDENTS

1. Be at the appropriate place at pick-up time.

2. Behave and buckle up in the van/car. No Horseplay!

3. Change into your uniform and arrive promptly for class.

4. Keep your personal items organized in a cubby, or your book bag.

5. Do your homework. Be quiet and respectful of others who are also doing their homework. If you have a question or need help, raise your hand, just like in school.

6. No running at all when not on the exercise floor.

7. Use inside voices.

8. Outside of class time, do not TOUCH, PUNCH, HIT, KICK, PINCH (or any other form of contact) another student or instructor.

9. Follow all instructions and directions that are given by your Instructors and Sempai.

10. No inappropriate language or name-calling is allowed at any time.

11. Be respectful at all times to your Parents, Instructors, Teachers and fellow students.

## DISCIPLINE POLICY

**In order to maintain a safe program, we occasionally find it necessary to discipline a student. We feel that effective and positive ways of behavior management are:**

1. REDIRECTION: We will stop the child and calmly learn what has happened, why and how they see it, and then suggest other ways of handling the situation. Then, we will redirect their attention.

2. SEPARATION: We will have them sit apart from the rest of the group and rest for a short time. This gives them an opportunity to calm down. Then we will explain to them possible alternative behaviors.

3. PARENT CONFERENCE: If a child's behavior remains problematic, a parent conference will be held. If there is little or no improvement in the child's behavior after the parent conference, termination of enrollment may become necessary and remains at the sole discretion of American Sports.

4. TERMINATION: Termination of enrollment will be at the sole discretion of American Sports Karate After School Program Administrative Staff.

## PARENT/GUARDIAN – Please initial and sign below:

\_\_\_\_\_ I have read, understand and agree to the pricing, testing fees & equipment policy

\_\_\_\_\_ I have read, understand and agree to the payment and pickup deadline policy

\_\_\_\_\_ I have read, understand and agree to the parent's responsibilities

\_\_\_\_\_ I have read, understand and agree to the rules for students

\_\_\_\_\_ I have read, understand and agree to the discipline policy

_____ Date ____ / ____ - _____
<b>PARENT/ GUARDIAN SIGNATURE</b>
_____ Date ____ / ____ - _____
<b>PARENT/ GUARDIAN SIGNATURE</b>

# Homework Policy:

At American Sports Karate we feel it takes a commitment from everyone involved to help a child succeed academically. A cooperative effort from the school, parents and our Little Champions Program staff will help ensure each child is performing to the best of their ability. As a parent of a child in American Sports Karate's Little Champions After School Program, it is important that you understand what you can expect from our program and how we need your feedback, direction and understanding to best support your child academically.

Although it is one of our primary directives to help each child in our program with their homework on a daily basis, as with any such program, there are some limitations. Our program designates from 3:50 pm to 5:00 pm each day for homework time and independent study and our program usually has between 15 and 20 children in attendance. Scheduled homework time might vary slightly depending on schedule of martial arts classes.

With these factors in mind, please find below our promise to you and your child as well as the commitment we expect from each child enrolled in our program and their parents.

## **Our Commitment:**

- To provide a quiet and comfortable environment for homework and study.
- To identify students who have questions or difficulties regarding their homework and to answer those questions and or work through a lack of understanding without doing the work for them.
- To review each child's work as needed to ensure it is neat and correct within that child's reasonable capabilities.
- To provide positive redirection to any child who may be off task.
- To do the best we can with any child who may be below grade level in a particular subject or who may have issues with focus and staying on task, without neglecting the needs of the other students in the program.

## **Parent's Commitment:**

- To understand that given the number of students in our program, we can only devote so much time to each student before it becomes unbalanced and unfair to the larger student population.
- To understand that if a child requires substantial and frequent redirection to focus on their work, we may not be able to provide the full assistance that child may need.
- To understand that it is the intent of our program to help each child with as much of their homework as we can and to see to it that what they do complete is done as correctly as possible for that child. This may result in the child not completing all of their homework each day.
- To understand that American Sports Karate's After School Program does not provide independent private tutoring and does not have the staff available to remediate a child who may be below grade level in any particular subject.

## **Student's Commitment:**

- To be honest in presenting the teacher with a list of homework and expectations for each day.
- To immediately request a teacher's help by raised hand on items they are struggling with.
- To work on most challenging assignment first, completing all assigned items before continuing.
- To respect their peers who are studying by working quietly & diligently for the full homework period.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Student Signature

## RELEASE AND WAIVER AGREEMENT

I \_\_\_\_\_ am the parent/guardian of \_\_\_\_\_ . As parent/guardian, I am entering into the following Release and Waiver Agreement with American Sports Karate, LLC. I understand that I am signing this Release and Waiver Agreement in consideration for and as a requirement of the student participating in any American Sports Karate activities, classes, self defense clinics, after school programs, seminars or other functions organized by or associated with American Sports Karate LLC, whether located at the American Sports Karate facility or other location(s).

For myself individually and as parent/guardian for the student, and for successors, heirs or assignees and legal representatives, I do now and forever, fully and finally, release, discharge and waive American Sports Karate, LLC and all of its agents, employees, instructors, heirs, assigns, insurer, from any and all claims, demands, damages, expenses, costs, actions or causes of actions known or unknown, past, present or future for any personal injuries including bodily injury or death, which are alleged to have arisen out of or resulted from student's participation in any and all activities organized by or associated with American Sports Karate, LLC, including but not limited to, martial arts classes, exercises, drills, and sparring. I understand that participation in martial arts activities includes a risk of serious personal injury or even death. I know that martial arts are a contact endeavor, and I understand that I am responsible with the guidance of the student's doctor for evaluating the student's physical condition and ability to participate in the martial arts classes and/or other activities provided by or associated with American Sports Karate, LLC. By signing this Release and Waiver Agreement, I am also stating that the student has the physical ability and health necessary to participate in martial arts classes.

I further represent that I have authority, as parent and/or guardian, to sign this Release and Waiver Agreement.

This Release and Waiver Agreement executed this \_\_\_\_ day of \_\_\_\_\_, 201\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Parent/Guardian Name

## AUTHORIZATION AND URGENT CARE WAIVER

I hereby authorize American Sports Karate, LLC., all instructors, staff, employees, volunteers and agents thereof, to act on my behalf in an emergency requiring medical attention or any other humane action to myself or to the student. I hereby waive and release American Sports Karate, LLC., and all of its instructors, staff, agents, employees, servants, assigns, insurers thereof, and fellow students from all liability for any injuries or illnesses incurred during any and all activities provided by or associated with American Sports Karate, LLC. I further release American Sports Karate, LLC, and all of its instructors, staff, employees, volunteers, fellow students and agents (hereafater "American Sports Karate LLC") of any and all liability during rescue, care and/or assistance of any kind in an emergency or medical situation or in a situation where there may be a reasonable and foreseeable risk of injury to the student or another person.

I authorize American Sports Karate, LLC and all of its instructors, staff and agents to provide immediate reasonable care in the event of an injury to the student and release American Sports Karate, LLC and all of its instructors, employees and agents from any and all liability related to the treatment of care. I further understand that any care provided by American Sports Karate, LLC will be limited to immediate simple first aid care. Any additional care will be provided for by medical professionals, for which American Sports Karate LLC retains no liability. I also understand that American Sports Karate, LLC does not have medical personnel as agents or employees or independent contractors at the facility, events or competitions. Providing any immediate care will be at American Sports Karate LLC's sole discretion and American Sports Karate LLC has no obligations to provide such care if it finds itself unfit to do so.

I understand that participation in martial arts classes and all other activities provided by or associated with American Sports Karate, LLC., whether within American Sports Karate LLC's facilities or outside, involves physical activity and, as such, carries with it the risk of injury or death. Should an injury occur during any activity provided by or associated with American Sports Karate LLC, inside or outside American Sports Karate's facility, any and all medical expenses incurred are the sole responsibility of the participant or participant's family. American Sports Karate, LLC and its instructors, staff and agents retain no liability for any and all expenses related to injuries to the participants. Furthermore, American Sports Karate, LLC retains no liability and makes no representation as to the quality or type of medical care and services that will be provided by urgent care and hospital facilities or by any and all of their staff, employees and independent contractors.

Student Name \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

Date \_\_\_\_\_



**PERMISSION TO RIDE FORM /AUTHORIZATION OF TRANSPORTATION**

I hereby authorize American Sports Karate, LLC. to transport \_\_\_\_\_, as a student of American Sports Karate LLC, to and from school, events, functions, and competitions organized by or associated with American Sports Karate, LLC., and any other places visited from time to time as deemed reasonable by American Sports Karate. Furthermore, I hereby authorize American Sports Karate LLC to transport him/her to medical facilities, including, but not limited to urgent care and hospital facilities, in case of an injury or an emergency requiring medical attention or any other humane action.

I hereby represent and warrant that I have the authority to give such permission.

Student Name \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

Date \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name