

SHOJIN KAI KARATE (under the program of UFC Gym Mamaroneck)

MEMBER REGISTRATION

SJK Membership ID# : _____ Date Join: _____

Name: _____
(Last) (First)

Address: _____
(Street) (Apt. #)

Tel: _____ (City) (State) (Zip)
E-mail: _____

Birth Date: ____ / ____ / ____ Weight: _____ Height: _____ / M F (circle one)

Emergency Contact: _____
(Name) (Tel #) (Relationship to Member)

Do you have any Physical/Medical conditions we should know? - Yes / No
If yes, please explain the details. _____

How did you hear about Shojin Kai Karate? _____

What are your goals in karate training? _____

What is your occupation? _____

TUITION:	\$150.00/month (Adults & Children)		
	Payment: Cash or Check payable to UFC Gym Mamaroneck		
Cash (pay at the front desk)	Credit Card – Master / Visa / Amex (circle one)		
Credit Card #:	Exp. Date:	Security Code:	
Card Holder Name	Phone #		
Signature:	Date:		/ /

MEMBER ASSUMPTION AND RELEASE OF LIABILITY

The Karate program (Shojin Kai Karate) offered by UFC Gym Mamaroneck, DBJC Inc. and its owners, employees, instructors (collectively "Fitness Center") will involve sparring and physical contact with other individuals and/or heavy bags, which may result in personal injury. Other programs offered by the fitness center, including Weightlifting, Aerobics, Boxing, Kickboxing, Martial Arts, Wrestling, Cycling, and other events also present a risk of personal injury to the participant (you). By signing below, I am acknowledging my intent to release, waive and discharge the Fitness Center from any claim or liability for injury to my person, my children or other minor person for whom I am responsible, hereafter occurring at or around the Fitness Center. Accordingly, I, for myself and my children, and for my or their successors, personal representatives, and assigns, hereby (1) release and waive any claims and causes of action against the Fitness Center for personal injury, loss and/or consequential damage to me, my children, or other person for whom I am responsible, resulting from future passive or active negligence of the Fitness Center in operation, management or supervision of the Fitness Center, and (2) agree to indemnify, defend and hold the Fitness Center free and harmless from any cost, loss or liability arising out of any injury to me, my children, or other person for whom I am responsible in or around the Fitness Center proximity resulting from negligence of the Fitness Center.

By _____ Date _____ / ____ / ____
STUDENT or PARENT/GUARDIAN signature, if student is under 18 years old