

FIRST INSTICT STREET TACTICS®

STUDENT ENROLMENT AGREEMENT

MAIL THIS FORM AT THE ABOVE ADDRESS, FAX TO: (702) 947-6583
OR EMAIL AT FIST@THEDOJANG.COM

CONTRACT DATE: ___/___/___ STUDENT DATE OF BIRTH: ___/___/___ MALE: _____ FEMALE: _____
 STUDENT LAST NAME: _____ STUDENT FIRST NAME: _____ M.I. _____
 PAYER'S LAST NAME: _____ PAYER'S FIRST NAME: _____ M.I. _____
 ADDRESS: _____ APT. NO. _____
 CITY: _____ STATE: _____ ZIP: _____
 PAYER'S DATE OF BIRTH: ___/___/___ E-MAIL: _____
 HOME PHONE NUMBER: _____ WORK PHONE NUMBER: _____

Cash price: \$100.00	Discount FIST T-Shirt Price: \$16.00 each X _____ = _____
Refresher Course \$80.00 (Must provide FIST level certificate of completion)	Balance Due: _____
T-Shirt Sizes: <input type="checkbox"/> XXL <input type="checkbox"/> XL <input type="checkbox"/> L <input type="checkbox"/> M <input type="checkbox"/> S	

THE UNDERSIGNED PROMISE TO PAY the amount budgeted in one equal installment of \$_____.00 the first month installment being due on the first session of the month to be paid **DIRECTLY** to **THE DoJANG**. **THE UNDERSIGNED AGREES** to receive and participate in and the school agrees to teach, a course of martial arts lessons, the program goal selected being a **one month** course with lessons to be taught during a period of four consecutive weeks. **I UNDERSTAND** that under the terms of this agreement, the school obligates itself to furnish me with competent instructions and suitable facilities for teaching lessons. All class sessions are supervised by qualified personnel trained in the procedures and traditions of the martial arts. The regular hourly tuition is \$40.00 per hour however a substantial discount has been provided me by virtue of enrolling in a regular course. **THE STUDENT** hereby represents that he/she is physically fit to receive and participate in the prescribed course of instruction. **I UNDERSTAND** that my tuition is arranged to be made in monthly installments and is not affected by my lesson schedule and/or attendance. **I UNDERSTAND** and agree that my presence and activities are completely at my own risk and I do hereby indemnify, release and forever discharge **THE DoJANG**, its instructors, members, agents and any other person or persons connected with said School against and form all liability, responsibility and all claims for personal injuries or any loss of personal property sustained by me not caused by or resulting from the negligence of the owners, operators, employees or persons in charge of such establishment, or injuries or damage to person or property of others caused by me while in **THE DoJANG** while in or near the premises or place of activity of said School. I understand that if for any reason, that the students or my enrollment is terminated by me, or employee / sub-contractor of **THE DoJANG**, **my payments will not be refunded. I WILL** faithfully comply with all the rules and regulations of the school and conduct myself so that I will not disgrace the honor of the traditions of the martial arts. I will not attempt to teach any of the aspects of Taekwondo and F.I.S.T. elsewhere except with the expressed and written consent of the Chief Instructor and further agree that pictures taken of me in connection with the School can be used for publicity or promotion at any time without compensation. I further understand that failure to complete the lessons does not relieve me of my obligation to pay the tuition in full. **I ACKNOWLEDGE** receiving a copy of this agreement.

CREDIT CARD INFORMATION:

Type _____ Issuing Institution Account # _____
Expiration Date: ___/___/___ Name at it appears on the card _____
The address that the card is billed to _____ the amount to be debited from my account is _____ on the _____ day of each month, commencing on the _____ day of _____ (month / year).
This authority is to remain in full force and effect until the expiration date of my student enrollment agreement is concluded or the tuition is paid in full.
Authorized, Agreed and Accepted _____ Date: _____

PAYING BY CHECK:

PLEASE MAKE CHECKS PAYABLE TO: THE DOJANG 2470 EAST PEBBLE ROAD SUITE 112, HENDERSON NEVADA 89074 ALL RETURNED CHECKS WILL BE CHARGED A SERVICE CHARGE OF (\$25.00) TWENTY-FIVE DOLLARS.
--

AS REQUIRED by General obligations Law, you have certain rights to cancel this agreement. You may cancel this agreement without any penalty or further obligation within three (3) days from the date of this agreement, Notice of cancellation shall be in writing and mailed to the school by registered or certified mail. **A cancellation fee** of ten dollars (\$10.00) will be charged to your credit card. **I UNDERSTAND** my rights as stated above.

DATE PARENTS OR GUARDIANS SUGNATURE STUDENT'S SIGNATURE