



Monticello MMA, 159 E Broadway, Monticello • NY 12701  
845-662-1697 • [www.BudoJJ.com](http://www.BudoJJ.com)

New Registration  
 Renewal  
 Sent Date: \_\_\_\_\_  
CrowneOneAcct#  
800-733-6285  
[Kim@CrowneOne.com](mailto:Kim@CrowneOne.com)

Signing up for: **Aikido** , **BudoJiu-Jitsu** , Weapons Training

Cardio Kickboxing , **Woman's Self-Defense**  Other: \_\_\_\_\_

### Student Training Agreement

<b>Client:</b>			<b>*Today's Date:</b>
<b>Address:</b>			<b>*How did you hear about us?</b> <input type="checkbox"/> VIP Start Date:
<b>City:</b>			Student One: _____ Weight: _____ Hair: _____ Eyes: _____ Height: _____ Birth date: _____
<b>State/Zip:</b>			
<b>Phone:</b>			Student Two: _____ Weight: _____ Hair: _____ Eyes: _____ Height: _____ Birth date: _____
<b>Cell Phone:</b>			
<b>*E-mail:</b> For Cancellations			Mothers Name: Fathers Name:
<b>Occupation:</b>			*No Refunds are given after 2nd lesson. First Payment Method: <input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> Charge
<b>Medical Conditions:</b>			Emergency Contact Name: Emergency Contact Phone:
Membership Type: Ongoing <input type="checkbox"/> Term <input type="checkbox"/> Program Price: \$ _____ Registration Fee: \$ _____ Total Price: \$ _____ Down Payment: \$ _____ Balance: \$ _____ Program begins: ___/___/___ Program Ends: ___/___/___		Payments are due on the same day of each consecutive payment period as indicated below. If no box is selected, payments are due monthly. ( ___ / ___ / ___ ) in the amount of \$ _____ Month Day Year <b>Frequency:</b> <input type="checkbox"/> Monthly (12) <input type="checkbox"/> Bi-Monthly (6) <input type="checkbox"/> Quarterly (4) <input type="checkbox"/> Semi-Annually (2) <input type="checkbox"/> Annually (1) <input type="checkbox"/> Bi-Weekly	

Automatic Renewal Program: Provided that Student is not in default of this agreement, and subject to the terms and conditions hereof, the membership will automatically renew for the rates set forth in this agreement. Renewal terms may be canceled by member at any time provided a 2 week written notice is delivered to Crowne One. In the event that this agreement is not expired and is not paid in full, Student must pay a \$75 early termination fee and provide written notice sent via certified mail or fax, **2 weeks** in advance of the termination date.

This agreement made on this: \_\_\_ Day of: \_\_\_\_\_, 20\_\_\_ between Michael Perez hereinafter referred to as

Instructor, and: \_\_\_\_\_ hereinafter referred to as the "Student or Student parent." This instructor shall not be liable for any damages arising from personal injuries sustained by the member in, on, or about the premises of any one of the said instructor's gymnasiums. Member in attending said gymnasiums and using the facilities and equipment therein does so at his or her own risk. Member assumes full responsibility for any injuries or damages which may occur to the member in, on, or about the premises of the said (dojo) gymnasiums and he or she does hereby fully and forever release and discharge the instructor and all his employees and agents from any and all demands and damages, rights of action or causes of action, present or future, where the same be known or unknown, unanticipated, resulting from or arising out of the member's use or uninvited use of the said gymnasiums of facilities, service, instruction and equipment thereof, including, but or arising limitations, any claims for personal injury resulting from or arising of the negligence of the instructor, the gymnasium, or their owners, agents and employees, or the agents and employees of the Instructor and negligence of any other persons present at said premises including other persons using the said premises as members.

Checking or Savings Routing # \_\_\_\_\_ Bank Name: \_\_\_\_\_

Bank/Card Account # \_\_\_\_\_ Expires: \_\_\_/\_\_\_

I hereby authorize Monticello Mixed Martial Arts to initiate debit entries through their billing agency, Crowne One Network, Inc; against my bank or credit card account, and the bank or credit card provider to debit the same of such account. This authority is to remain in force and in effect for the monthly payment amount as indicated above on a month to month or term basis, (whatever is agreed upon herein) or until the billing company has received written notification from me of its termination in such time and in such a manner as to afford the billing company a reasonable time to act on it (2 week minimum).

**Pledge of Respect and Loyalty/Non-Compete:**

Also by signing below the student agrees not to teach the art nor any martial art within a 30 mile radius of any Nihon Goshin Aikido or Budo Jiu-Jitsu School with out the written consent of Michael Perez, while he/she is still an active student. And upon 2 weeks written notice of withdrawal from the two above mentioned schools the withdrawn student must wait 2 years before engaging in competitive activity not excluding, Martial Arts Training, Self-Defense, Woman's self defense, Cardio kick boxing, core training, fitness training, Mixed Martial Arts, Jiu-Jitsu, grappling, or wrestling.

Approved By / Member's Signature	Approved By/ Parent or Guardian Signature	Instructor's Signature	Date