



OFFICE USE		KF	TC		
	1 Year	<input type="checkbox"/>	<input type="checkbox"/>	Date	_____
	6 Months	<input type="checkbox"/>	<input type="checkbox"/>	Expiration	_____
	3 Months	<input type="checkbox"/>	<input type="checkbox"/>	Registration	<input type="checkbox"/>
	1 Month	<input type="checkbox"/>	<input type="checkbox"/>	Received by	<input type="text"/>
				Entered by	<input type="text"/>
					IS FMP

**STATUS**

New Student (White Belt)

Returning Student Rank \_\_\_\_\_ Test Date \_\_\_\_\_ Original Start Date \_\_\_\_\_

Transferring Student Rank \_\_\_\_\_ Test Date \_\_\_\_\_ Original Start Date \_\_\_\_\_

Current Student (Information Update)

**PERSONAL INFORMATION**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Birth Date \_\_\_\_\_ Occupation \_\_\_\_\_

Email \_\_\_\_\_

I acknowledge I will receive membership/account related emails and Student News updates.

I would also like to receive Tanisha Martin Coaching's weekly ezine, *Live the Life You Love*.

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**REFERRED BY**

Web Search       Drive-By/Saw Sign       Current CSC Student \_\_\_\_\_

Google Ad       Yellow Pages       Previous CSC Student \_\_\_\_\_

Google Places       Newspaper       Other \_\_\_\_\_

Facebook       Magazine

Facebook Ad       Radio

**INTEREST**

Health       Martial Arts       Philosophy

Fitness       Self-Defense       History

Conditioning       Self-Discipline       Chinese Culture

Weight Loss       Stress Relief       Other \_\_\_\_\_



PLEASE READ AND SIGN THE BACK SIDE...

# TERMS & CONDITIONS

## PAYMENT AGREEMENT

The Colorado Springs Chinese Shao-Lin Center, Inc., hereafter referred to as CSC, does not rely on Contracts as a form of commitment to pay. Monthly or Membership payments will be made to the "Chinese Shao-Lin Center" or "CSC." All fees are non-refundable. The one time Registration Fee, which includes the Shao-Lin Student Training Manual, will be paid on the first day of class. You are responsible for making your membership payment on time. Your membership entitles you to attend any regularly scheduled class at your current belt level or below. If you attend one (1) or twelve (12) classes per month, the cost is the same. The level of commitment is up to the student. CSC reserves the right to refuse service to anyone, as well as to terminate any membership at any time.

The month-to-month, 3-month, 6-month, and 1-year Membership includes all regularly scheduled classes for your current belt level, including Tai Chi and practice hours. A Tai Chi Membership includes Tai Chi classes and practice hours only. Memberships do not include Test Fees, Special Classes, Festivals, Seminars, or Equipment. Prices for events and inventory will be posted.

Signing below indicates that you understand and agree with the payment agreement.

## WAIVER OF LIABILITY

This is a legal instrument. If not understood, legal counsel should be consulted before signing. In this waiver Colorado Springs Chinese Shao-Lin Center, Inc., shall be referred to as the Chinese Shao-Lin Center or CSC.

I, \_\_\_\_\_, do hereby fully release and forever acquit CSC and its instructors, assistant instructors, visiting instructors, students, agents, employees, administrators, and lessors from any and all responsibility and liability for any and all personal injuries, loss of personal property, or any casualty that may result from my enrollment in the Chinese Shao-Lin Center, and any and all of its classes, programs, training, sparring, and sponsored travel.

This waiver shall be binding upon my heirs, executors, successors, and administrators. I hereby waive any and all rights to recover for damages, both at law and in equity, for loss of compensation, profits, services, contributions, support, loss and diminishment of estate, or any other costs and expenses, which I may hereafter acquire by reason of any damages, accident, casualty, incident, or event that may occur while I am enrolled in the Chinese Shao-Lin Center and participating in any and all of its classes, programs, training, or sponsored travel.

It is further understood that this waiver of liability is the entire, complete, sole, and only understanding and agreement by and between the undersigned pertaining to the subject matter and the things contained herein. There are no independent, collateral, different, or additional understandings or agreements, either oral or written. No promises, inducements, or other considerations were offered or tendered to the undersigned to secure this waiver. CSC reserves the right to terminate any membership at any time.

It is also understood that participation in class at CSC poses a possible inherent risk of injury (minimal or severe) while training or sparring. I will read selected excerpts from section three (3-3 - 8, 3-14 - 16) in the Student Training Manual before participating in classes.

BY SIGNING THIS WAIVER, I, THE UNDERSIGNED DO HEREBY ACKNOWLEDGE AND WARRANT THAT:

This waiver of liability was first read carefully in its entirety, and is fully understood and known to be a full waiver of liability as above stated and this waiver was signed and executed voluntarily without any reliance upon any statement by CSC, its instructors, assistant instructors, visiting instructors, students, agents, employees, administrators, or lessors. I further warrant that I am over 21 years of age as of the date stated below, or that I am fully and legally emancipated.

READ AND SIGNED THIS \_\_\_\_\_ OF \_\_\_\_\_, \_\_\_\_\_ YEAR AT COLORADO SPRINGS, CO  
DAY MONTH YEAR

BY \_\_\_\_\_  
STUDENT

FOR STUDENTS WHO ARE UNDER 21 YEARS OF AGE:

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_  
have read the above waiver and agree to its terms on behalf of my son/daughter.

BY \_\_\_\_\_  
GUARDIAN OF STUDENT