



Raul Castillo Martial Arts

Brazilian Jiu-Jitsu - Karate - MMA – Cardio Kick Boxing - Self Defense
Boxing - Seminars - Private Lessons - Personal Training - Camp
Birthday Parties - Kids Night Out - Kids and Adult Programs

765 Main Street, Half Moon Bay, CA 94019
650-560-0100 ▪ www.raulcastillomartialarts.com ▪ raulcastillomartialarts@gmail.com

STUDENT/GUEST MEMBERSHIP AGREEMENT

Last name: _____ First name: _____ Age _____
Birth date: ____ / ____ / ____ Male ___ Female ___ Weight: _____ lbs Height _____
Home Address: _____ City: _____ State: _____ Zip: _____
Cell #: _____ Student Email: _____
Driver's License #: _____
Medical Insurance: _____ Policy # _____

Parent/Guardian Information OR In Case of Emergency Notify:

Name: _____ Relationship: _____ Phone: _____
Email (Parent or Guardian): _____
Name: _____ Relationship: _____ Phone: _____
Email (Parent or Guardian): _____

Waver, Release and Indemnity Agreement

IMPORTANT: THIS RELEASE IS A LEGAL CONTRACT BINDING UPON YOU, RAUL CASTILLO MARTIAL ARTS, ITS EMPLOYEES AND ASSOCIATES. READ IT CAREFULLY AND OBTAIN LEGAL ASSISTANCE IF YOU DO NOT UNDERSTAND IT:

I, the undersigned, acknowledge and state that I have voluntarily applied to become a member of and/or to participate in the activities of Raul Castillo Martial Arts (RCMA) DBA Half Moon Bay Mixed Martial Arts (HMBMMA), including but not limited to, the instruction, techniques and methods commonly know as Mixed Martial Arts, Brazilian Jiu-Jitsu, Karate, Boxing/ Muay Thai and Submission Grappling. I am aware and understand that Mixed Martial Arts and Submission Grappling are potentially dangerous activities. I am voluntarily of my own free will submitting an application for membership, becoming a member, and/or learning and participating in the RCMA training methods with full knowledge and understanding of the potential danger and hazards involved. I hereby consent and agree to completely accept alone any and all risks of injury or death. I also acknowledge and understand that the performance, practice, training and utilization of Mixed Martial Arts, Brazilian Jiu-Jitsu and Submission Grappling involve extremely strenuous physical activity, and that I have been advised to consult a physician before commencing and undertaking such activity. I hereby represent that, to the best of my knowledge, I am in good physical health and condition, sufficient to undertake the activities and practices of Mixed Martial Arts, Brazilian Jiu-Jitsu and Submission Grappling and any activity at RCMA. I hereby declare that I have read this release from liability, and that I fully understand the meaning and importance of its contents. I acknowledge that this release is a binding contract among RCMA and its associates and that under this contract, I am releasing RCMA and its associates from all liability for any claim I have against them. I further declare that I have full legal capacity to be bound to this contract, and that I am signing this contract of my own free will.

Media Use Consent:

RCMA reserves the right to use and display any and all media (photo, film, etc.) obtained of its members for use in advertisement of their facilities and products.

Member/Guest Signature: _____ Date: _____

Parent/Guardian Signature (if under 18): _____ Date: _____

General Rules

- No smoking or drugs, including alcohol are allowed on the premises.
- No posting of personal advertising or other literature is allowed without permission of management.
- Adjustments to music, heater, fans or other equipment is to be made by staff only.
- Members are not allowed behind the front desk.
- Bottles, cans, paper and trash must be disposed of in the appropriate receptacles provided.
- All equipment must be put properly back in its place after use.
- Properly cleaned Gi and equipment are required for class participation.
- Members must have respect for trainers, instructors and other members. Membership may be revoked for disrespectful behavior.
- Please see General Dojo Rules posted at the desk for more information.

Membership Activity and Payments Agreement

- Payments to be made via Tuition Subscription Authorization Subscription by credit card (+3% processing fee) or checking account through EFT. Checks to be made payable to *Raul Castillo Martial Arts*.
- Enrollments are to automatically be charged monthly on the 1st of every month.
- Notification of inactivation of membership and auto debit for monthly tuition required *by email* at least one week prior to the next billing cycle. No credits or refunds will be issued if notified after processing.
- Monthly tuition is based on a 4 week month.
- Bounced checks are subject to a \$30 charge.
- Members with payments past due will be asked not to participate until their payments are made.
- Annual Membership Fee of \$100 for individuals and \$150 for families is due upon enrollment with annual renewal due by the anniversary of your enrollment date.
- Monthly fees are subject to change at any time.
- All payments and fees prepaid or otherwise are non-refundable.

<u>EFT Set Up</u>	<u>Important Dates</u>
Annual Liability Insurance _____	Free Trial Class _____
Training Style _____	Enrollment Date _____
Frequency of Train _____	EFT Signature Date _____
Family Package (Y/N) _____	EFT Enrollment Month _____
Family Members _____	Monthly Tuition _____
Notes _____	Gift Certificate _____
_____	Notes _____
_____	_____
Staff Member _____	_____

Entire Agreement Clause

The membership acknowledges that neither the Raul Castillo Martial Arts nor anyone else has made any representations or promises upon which he/she relied that are not stated in this agreement. This document contains the entire agreement between the Member and RCMA and replaces any other written agreement. If a court of law declares any part of this agreement is invalid, it will invalidate the remaining parts which continue to be unaffected. If RCMA does not enforce any rights in this agreement for any reason, we do not waive the right to enforce it later.

Member/Guest Name _____ Date _____

Member/Guest Signature _____ Date _____

Parent/Guardian Signature (if under 18 years of age) _____ Date _____

Staff Signature _____ Date _____