



7480 Narcoossee Road, Suite 100A-E

Orlando, Florida 32822

407-826-1994

www.upmafc.com

**Name of Camper:**

\_\_\_\_\_

**Date of Registration:** \_\_\_\_\_

**Registration Fee/Deposit:** \_\_\_\_\_

**SUMMER CAMP SESSIONS:** (Please check session that apply)

**Cheer Prep Tumbling Camp:**

**Session 1 - Beg:** \_\_\_\_\_

**Session 2: Int/Adv** \_\_\_\_\_

**Session 9 - Beg:** \_\_\_\_\_

**Session 10: Int/Adv** \_\_\_\_\_

**Martial Arts Camp:**

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_ Session 3: \_\_\_\_\_

Session 4: \_\_\_\_\_ Session 5: \_\_\_\_\_ Session 6: \_\_\_\_\_

Session 7: \_\_\_\_\_ Session 8: \_\_\_\_\_ Session 9: \_\_\_\_\_

Session 10: \_\_\_\_\_

**EXTENDED DAY CAMP OPTION:**

**Cheer Prep Tumbling Camp:**

**Session 1:** M T W T H F

**Session 2:** M T W T H F

**Session 8:** M T W T H F

**Session 10:** M T W T H F

## Camper and Emergency Contact Information

Student's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Boy: \_\_\_\_\_ Girl: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Email: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Carrier and Policy #: \_\_\_\_\_

How did you hear about us?

\_\_\_\_\_

### **AUTHORIZED PICK UP:**

Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Driver License #: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Driver License #: \_\_\_\_\_

**THIS SECTION MUST BE SIGNED BY PARENT AND/OR GUARDIAN BEFORE  
REGISTRATION IS ACCEPTED.**

I hereby give permission to Ultimate Power Martial Arts & Fitness Center, Inc., to transport the child named above off the school property for the purpose of medical care or program activities as deemed appropriate by the Ultimate Power Martial Arts & Fitness Center, Inc. I hereby authorize the staff of Ultimate Power Martial Arts & Fitness Center, Inc., to provide for and secure treatment of all health issues that arise at the school for child named above. In the event I cannot be reached in an emergency, I give permission to the physician selected by the school staff and/or instructors to hospitalize, secure proper treatment for, and to order injection, anesthetic or surgery for the child named above. I understand that Ultimate Power Martial Arts & Fitness Center, Inc., does not provide accident/medical insurance for the child named above. Medical bills, including prescription drugs, will be the responsibility of the parent or guardian named below. I authorize Ultimate Power Martial Arts & Fitness Center, Inc. to use any of my credit cards on file to pay for medical bills and/or prescription drugs.

Rules for students are the same for everyone without regard to race, color, national origin, gender or disability. I understand that all students will be treated as individuals and respect will be shown for a range of abilities and behaviors. I agree that Ultimate Power Martial Arts & Fitness Center, Inc. reserves the right to dismiss a child from school whose special needs they are not able to provide for or whose conduct is not in the best interest of the school, without refund. I will notify the staff and/or instructors if my child has any serious restrictions related to his/her participation in the summer camp program.

I, agree to the following policies regarding summer camp program fees: **Registration Fees & Deposits are non-refundable; No refunds will be given for canceling within 7 days of child's summer camp program session; No refunds are given if a student is dismissed from summer camp program due to disciplinary action; No refunds are given if student leaves early due to homesickness or personal commitments.**

*Ultimate Power Martial Arts & Fitness Center, Inc. has my permission to use photographs or video taken of my child while at the summer camp program for promotional purposes, including flyers, website, postcards, Facebook, Twitter, and YouTube.*

**I (Parent/Guardian) have read and agree to all the conditions of this registration.**

Date: \_\_\_\_\_

Print Name of parent/guardian: \_\_\_\_\_

Signature of parent/guardian: \_\_\_\_\_

## **CAMP TUITION:**

The cost of Martial Arts Camp is **\$45.00** a day or **\$190.00 a week** for full day camp (7:00 AM to 6:00 PM) per student, per weekly session. Cheer Prep Tumbling Camp is **\$180.00 a week** (9:00 AM to 2:00 PM), per weekly session.

## **PAYMENT:**

**Payment is due in full and at time of registration for each session registered.** Camp registrations must be received at least 7 days prior to the start of the camp session to prevent a **\$25.00 late registration fee**. Late fees will be added to the tuition at time of registration.

## **CAMP SESSIONS:**

**Session 1:** June 5-9

**Session 4:** June 26-30

**Session 7:** July 17-21

**Session 10:** Aug 7-11

**Session 2:** June 12-16

**Session 5:** July 3-7\*

**Session 8:** July 24-28

**Session 3:** June 19-23

**Session 6:** July 10-14

**Session 9:** July 31-Aug 4

**\* Closed – July 4<sup>th</sup>, 2017**

## **CHEER PREP TUMBLING CAMP INCLUDES:**

Cheer and Tumbling Sessions are from **9 am to 2 pm** and include a morning snack and drink only. Campers can purchase additional snacks and drinks for an additional charge. Should Cheer Tumbling campers choose to purchase a hot lunch, an additional fee of \$7.00 per day will be charged at time of registration.

## **MARTIAL ARTS CAMP DISCOUNT:**

**\$160.00** – Discounted price if enrolled for 4 (four) days of the same week camp

**\$190.00** – Discounted price if enrolled for 5 (five) days of the same week camp

**\*\*All tuitions fees must be paid in full 7 days prior to session to receive discount\*\***

## **EARLY REGISTRATION:**

Register by **April 30<sup>th</sup>, 2017** with payment in full for each session and receive ½ off the \$75.00 registration fee. Register by **May 15<sup>th</sup>, 2017** and receive \$15.00 off the \$75.00 registration fee.

## **SIBLING(S) DISCOUNT:**

If two or more siblings are attending the same **full week camp** session a \$25.00 discount will be offered off the total full week tuition.

## **EXTENDED CHEER PREP TUMBLING DAY CAMP OPTION:**

Cheer Tumbling Camp may be extended daily until 6 PM for an additional charge of \$10.00 per day.

## **LATE PICK UP FEES:**

Late fee charges will apply after **2:15PM/6:15PM**. Any camper(s) who are picked up after **2:15PM/ 6:15 PM** will be charged an additional **\$5.00** for the first 15 minutes and **\$2.00** for every 10 minutes thereafter.

**FOOD/BEVERAGES:**

A **sack lunch** is required for Cheer Prep Tumbling Camp. Camper can purchase a hot lunch, drinks and snacks at an additional charge.

**DROP OFF / PICK UP:**

Drop off is as early as 7:00AM for full day Martial Arts Camp and 8:30 AM for Cheer Prep Tumbling Sessions. Pick up is promptly at 2:00PM for Cheer Tumbling Camp and 6:00 PM for Martial Arts Camp daily. **Please Note:** Late fees will apply after **2:15PM/6:15 PM**. Fees must be paid before student returns for their next camp day and may be charged to the credit card on file.

**CANCELLATION POLICY (PLEASE READ):**

*All registration and camp fees are non-refundable! Switching sessions is permitted and based on space availability however change must be made at least 14 days prior to start of the new camp session and a **\$25.00 fee will apply.***

I have read and acknowledge the Summer Camp Cancelation Policy.

Initials: \_\_\_\_\_

**AUTHORIZATION TO CHARGE CREDIT CARD**

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Identification Number (last 3 digits located on the back of the credit card): \_\_\_\_\_

One Time Charge: \$ \_\_\_\_\_ (USD)

Ongoing Weekly Charge: \$ \_\_\_\_\_ (USD)

Ongoing Monthly Charge: \$ \_\_\_\_\_ (USD)

I hereby authorize **ULTIMATE POWER MARTIAL ARTS & FITNESS CENTER, INC.** to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this fee and/or purchase in accordance with the issuing bank cardholder agreement. Should credit card be declined, a **late fee of \$25.00 will be charged.**

Cardholder – Print Name, Sign and Date Below:

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## Emergency Contact and Medical Information for a Child

M   F  
Sex

Child's Name

Date of Birth

Parent's/Guardian's Name

Parent's/Guardian's Name

(   )

(   )

(   )

(   )

Home Phone

Work Phone

Home Phone

Work Phone

Address

Address

City, ST ZIP Code

City, ST ZIP Code

### Alternative Emergency Contacts

Primary Emergency Contact

Secondary Emergency Contact

(   )

(   )

(   )

(   )

Home Phone

Work Phone

Home Phone

Work Phone

Address

Address

City, ST ZIP Code

City, ST ZIP Code

### Medical Information

Hospital/Clinic Preference

Physician's Name

Phone Number

Insurance Company

Policy Number

### Allergies/Special Health Considerations

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that neither parent/guardian can be reached in the case of an emergency.

Parent's/Guardian's Signature

Date

I give permission for my child to go on field trips and any and all events outside of Ultimate Power Martial Arts, Inc., premises. I hereby release Ultimate Power Martial Arts & Fitness Center, Inc., officers, directors, employees, instructors, coaches, volunteers & staff members from any and all liability in case of accident during activities related to Ultimate Power Martial Arts & Fitness Center, Inc., as long as normal safety procedures have been taken.

Parent's/Guardian's Signature

Date

Witness Signature

Date

Ultimate Power Martial Arts & Fitness Center, Inc.  
7480 Narcoossee Road, Suite 100A-E - Orlando, Florida 32822

**RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT IN FAVOR OF  
ULTIMATE POWER MARTIAL ARTS & FITNESS, LLC.**

I understand that there are risks and dangers in participating in martial arts activities and that in order to participate, in any such activities, including but not limited to Tae Kwon Do, Martial Arts, Tumbling, Zumba, PiYo, Kickboxing, Tricking, Stunting, Self Defense, Aerobics, Dancing, Camps, and other martial arts classes/training, including classes/training involving the use of martial arts weapons, I must give up my rights to hold Ultimate Power Martial Arts & Fitness Center, Inc. and any other entity or charity associated with Ultimate Power Martial Arts & Fitness Center, Inc., responsible or liable for any damage that I may suffer while participating in such classes/training provided by Ultimate Power Martial Arts & Fitness Center, Inc., waiting at or on Ultimate Power Martial Arts & Fitness Center, Inc. premises to participate in such classes/training, walking through the premises at Ultimate Power Martial Arts & Fitness Center, Inc. prior to or after such classes. Knowing this and in consideration for being permitted to participate in martial arts classes/training with Ultimate Power Martial Arts & Fitness Center, Inc., I hereby voluntarily forever release, discharge and hold completely harmless Ultimate Power Martial Arts & Fitness Center, Inc., and all other entities or charities associated with Ultimate Power Martial Arts & Fitness Center, Inc., and their members, offices, directors, agents, employees, heirs, assigns and independent contractors from any and all responsibility for, or liability resulting from or arising from, my participating in martial arts classes/training at Ultimate Power Martial Arts & Fitness Center, Inc., and being on the premises at Ultimate Power Martial Arts & Fitness Center, Inc.

I understand that the martial arts classes provided at Ultimate Power Martial Arts & Fitness Center, Inc. may include, but will not be limited to, activities such as kicking, punching, hitting, stretching, twisting, jabbing, lunging, rolling, falling, jumping, yelling, running, hand locks and the use of various martial arts weapons and equipment. I realize that these activities, as well as all other martial arts activities, can be dangerous, but I am voluntarily choosing to participate in some or all of these activities and agree to assume the risk associated with my participation therein. I understand that I am assuming full responsibility for any and all risks of death, personal injury, emotional pain and suffering, property damage and economic loss that might be suffered by me as a result of my participation in martial arts classes at Ultimate Power Martial Arts & Fitness Center, Inc. I agree that this release shall bind me, my spouse, my heirs, my personal representatives, my assigns, my children and my and their agents.

I hereby further agree to release, indemnify and hold completely harmless Ultimate Power Martial Arts & Fitness Center, Inc., and all other entities associated with Ultimate Power Martial Arts & Fitness Center, Inc., and their members, officers, directors, agents, employees, heirs, assigns and independent contractors harmless from any and all liability and costs, including attorney fees, associated with or arising from my participating in martial arts classes/training at Ultimate Power Martial Arts & Fitness Center, Inc., waiting at or on Ultimate Power Martial Arts & Fitness Center, Inc. premises to participate in such classes/training, and walking through the premises at Ultimate Power Martial Arts & Fitness Center, Inc. prior to or after such classes/training.

I understand that if I were to file a law suit against Ultimate Power Martial Arts & Fitness Center, Inc., or any other entity associated with Ultimate Power Martial Arts & Fitness Center, Inc. and/or their members, officers, directors, agents, employees, heirs, assigns and independent contractors, as a result of any personal injury including death, emotional pain and suffering, property damage or economic loss suffered by me as a result of my participation in martial arts classes/training at Ultimate Power Martial Arts & Fitness Center, Inc., waiting at or on Ultimate Power Martial Arts & Fitness Center, Inc. premises to participate in such classes/training, and walking through the premises at Ultimate Power Martial Arts & Fitness Center, Inc. prior to or after such classes/training, that this release would bar the lawsuit and the court would dismiss it on the grounds that by signing this release, I have expressly assumed all the risks associated with participation in such activities, including but not limited to negligence on the part of the martial arts, Zumba, Yoga, Kickboxing, Tumbling, Self Defense and Dance instructors in the performance of their duties, negligence by other members of Ultimate Power Martial Arts & Fitness Center, Inc., negligence in the operation of machinery or equipment, and/or premises liability.

If I am signing this release on behalf of a minor child, I understand that I am giving up the same rights for the said minor as if I signed this release on my own behalf. I have read this agreement and understand the words and language in it and I am advised of all potential dangers incidental to participation in martial arts classes/training at Ultimate Power Martial Arts & Fitness Center, Inc., including travel to and from.

I agree that this is a document consisting of a total of one page and that I have been presented, have read and understood the contents contained herein and the rights that I am giving up by signing below where indicated.

Name: \_\_\_\_\_

Name of Minor: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_