



TINA TAKAHASHI
MARTIAL ARTS & FITNESS



2018 SUMMER CAMP REGISTRATION FORM

July 3-6 __ *PeeWee* July 9-13 __ *Girls* July 16-20 __ July 23-27 __ July 30-Aug 3 __ Aug 13-17 __ Aug 20-24 __ *Girls*

Camper's First Name _____ Family Name _____

Email _____ Age _____ Date of Birth ___ / ___ / ___
m d y

Parent #1 Name & Phone _____

Parent #2 Name & Phone _____

Address _____ Male ___ Female ___

Health Card _____ School & Grade _____

Medical Conditions (Please include pertinent medications, conditions ie. ADD, allergies: epipen location, recent injuries, emotional traumas etc.)

Dietary Restrictions: _____

How did you hear of our camp? _____

May we have permission to take your child's photograph or video which may be used on the Tina Takahashi Martial Arts website, in print, electronic media and/or newspapers? Yes No

Emergency Contact Names & Phone Number (if different from Parent #1 and Parent #2 on page 1.):

1. _____

2. _____

Previous Martial Arts Experience (ie. School & teacher's name, time, rank and martial art):

In consideration of my being accepted for membership at Tina Takahashi Martial Arts and Fitness, I agree to observe with strict adherence all dojo rules and regulations formulated for the purpose of maintaining order and for the protection of pupils from injury and I do hereby remise, release and forever discharge Tina Takahashi Martial Arts and Fitness, the directors, instructors, successors and assigns and any other persons, firms, association, bodies corporate and governing bodies and notwithstanding that the same may have contributed to or occasioned by their negligence from and against all claims, actions, costs and expenses and demands which I now have or can, shall or may hereafter have in respect to injuries, death, loss or damage to my person or property howsoever caused arising out of or in connection with my membership in and/or participation in a class/practice session, competition, demonstration or other event of the sports and martial arts hosted, arranged, sponsored or held by all of the above named individuals or organizations. It is understood and agreed that this agreement is to be binding on myself, my heirs, executors and assigns.

In witness whereof, I/we have hereunder set my/our hand in Ottawa this ____ day of ____ 2018.

Signature _____ Date _____

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2018 Summer Camp Fee Calculator



Name of Camper: _____ Week of: _____

Fees: (\$239 by Mar 31), (\$249 by April 30), (\$259 by May 30), (\$269 after May 30). Pee Wee camp less 10%. Please add 13%hst. Please call for half day weeks and daily rates.

1. July 3-6 (PW)	\$ _____	(less 10%)
2. July 9-13 (G)	\$ _____	
3. July 16-20	\$ _____	
4. July 23-27	\$ _____	
5. July 30-Aug 3	\$ _____	
6. Aug 13-17	\$ _____	
7. Aug 20-24 (G)	\$ _____	
2 nd child/camp -10%	\$ _____	
3 rd child/camp -15%	\$ _____	
4 th + child/camp -15%	\$ _____	
Early drop-off	\$ _____	Before 8:15 am add \$25
Late pick-up	\$ _____	After 5:15 pm add \$25
Uniform Rental	\$ _____	\$18/five days , \$14/four days
Uniform Purchase	\$ _____	\$125 (height _____ & weight _____)
HST	\$ _____	x .13
Total	\$ _____	(Cheque, cash, e-transfer, debit card)

Registration is complete when payment is received by cash or cheque payable to Tina Takahashi Martial Arts or e-transfer to tina@tinatak.com. 14 days or more advance notice for changes can get 90% credit that can be used towards future memberships/camps. 7-14 days notice can get 80% credit and less than 7 days notice can get 60% credit. Sorry, no refunds less than 24 hours before start of camp. In the unlikely event that there are insufficient numbers, camps may be cancelled/adjusted.

Please keep your receipt for income tax purposes.

**Refer a friend and receive \$50 credit for future courses/camps!

Before and after camp 8:15 am to 5:15 pm included in camp fee.

Camp starts 9:00 am. If dropping off **before 8:15 am** please indicate time.

Mon ____am Tues ____am Wed ____am Thurs ____am Fri ____am

Camp finishes 4:00 pm. If picking-up **after 5:15 pm** please indicate time.

Mon ____pm Tues ____pm Wed ____pm Thurs ____pm Fri ____pm

If uniform rental/purchase is needed, please indicate approximate height _____ & weight _____