Please print this form, fill it out and bring in to the studio for a tour and orientation meeting.

Call 865-2000 for an appointment.



Karate USA After School Program 2020-2021

Child's Information	D					
	Date of Birth:					
Child's age: Child's school:	Grade:					
Does your child have any allergies? _						
Does your child have any medical co	nditions that we should know about?					
Does your child take any medication	s?					
Parent's Information Parent's name:						
	State: Zip:					
Cell Phone:	Other Phone:					
Email Address:						
Place of Employment:	Phone:					
Emergency Contact Emergency Contact's Name:						
Relationship:	Phone number:					
Pick up authorization List of approved adults who are allowed to p	ick up your child. Identification is required and must be at least 18 years of age.					
Name:	Relationship:					
Name:	Relationship:					
Name:	Relationship:					
Name:	Relationship:					
How Did You Hear About Us? Website / Google / Sign / Flyer / Frie	nd / Current Member / Other:					
Referred by friend:	one you know, please let us know so we can properly thank them.					

The Karate USA After School Program is open on all days that Caddo Parish Public Schools are in session. Karate USA offers Day Camps on all days that Caddo Parish Public Schools are out of class for holidays and breaks. The After School Program does not include any Day Camps, but all After School Program students receive 50% discount on all Day Camps attended.

Tuition Information

Automatic payments are processed on Friday prior to the upcoming week. Method of payment is via automatic payments with Visa, MasterCard or ACH check withdrawal.

Pick up

Parent/guardian must provide names of persons who are authorized to leave the site with a child. Parent/Guardian is responsible to keep this information updated. At the time of pickup, id and signature will be required.

Extended Care is included with the price of every camp until 6:00pm. If you are going to be later than 6:00 p.m. please call Karate USA at 318-865-2000. *You will be charged a late fee of \$1 per minute, per child, after 6:00 pm.*

Parent's Responsibilities

- 1. You or an authorized adult must sign your child out of the After School program daily!
- 2. Please notify your school that Karate USA's After School Program will be picking up your child from school.
- 3. If your child does not go to school because he/she is sick, etc., you MUST notify us as soon as possible so that we can notify our drivers.
- 4. Check our lost and found weekly if your child has lost any items.

Rules for Students

- 1. Behave and buckle up in the van/car. No Horseplay!
- 2. Do not TOUCH, PUNCH, HIT, KICK, PINCH another student or instructor.
- 3. Follow all directions given by your Instructors and Teachers.
- 4. No bad language or name-calling of any kind is allowed at any time.
- 5. Be respectful at all times to your Parents, Instructors, Teachers and fellow students!

Discipline Policy

In order to maintain a safe program, we occasionally find it necessary to discipline a student. We feel that effective and positive ways of behavior management are:

- 1. REDIRECTION: We will stop the child and calmly learn what has happened, why and how they see it, and then suggest other ways of handling the situation. Then, we will redirect their attention.
- 2. SEPARATION: We will have the child sit quietly apart from the rest of the group and rest for a short time. This gives them an opportunity to calm down and think about their actions. Then we will explain to them possible alternative behaviors they may have chosen to avoid the problem. We may also have the child perform a reasonable athletic activity such as push-ups or squats as a behavior modification if multiple separations are required.
- 3. PARENT CONFERENCE: If a child's behavior remains problematic, a parent conference will be held. If there is little or no improvement in the child's behavior after the parent conference, termination of enrollment may become necessary.
- 4. TERMINATION: Termination of enrollment will be at the sole discretion of Karate USA.

Permission to ride/Authorization of Transportation

I hereby authorize Karate USA to transport my child to and from school, to medical facilities, including urgent care and hospital facilities, and any other places visited from time to time as deemed reasonable by Karate USA.

Parent/Guardian Signature	Date
Release to Photograph	
I agree that Karate USA can photograph my child and use USA for future promotion of the summer activities.	e images of my child for commercial purposes of Karate
Parent/Guardian Signature	Date
permission for my child to attend the After School Progra	Karate USA. I understand that Karate USA reserves the right
Davant/Cuandian Signatura	Data

After School Program Memberships

Check one box below to choose the BEST Membership for your family!

	VIP AFTER SCHO	OL MEMB	ERSHIP: 1 easy	y payment	of \$2199		
This membership covers the entire school year and is perfect for families that want to make one payment today of \$2199 and save \$801. This membership is non-refundable or							
		tran	sferrable.				
	h basis. This prog e. The weekly pay	amilies tha ram has a ments are	t want to atter total price of \$	nd the Afte 33000 and o prior to th	r School program on a an be cancelled at any e following week and		
has a total pric	ts love this afford mitting to the Aff e of \$2600 and is ed. Weekly payme	able meml ter School financed a ents of \$65	program for th It \$65 per wee	s perfect for ne entire sc k for 40 we riday prior	families that want to r nool year. This program eks. This membership to the following week a	1	
	After School F	Program	Automatic	Payment	: Plan		
Name of child:							
Parent/Guardian Name:							
Please review these guid	elines before sign	ing up for	automatic pay	ments.			
					chool. action date if your credi	t card or	
I acknowledge receipt of	the above payme	ent plan an	d understand a	and agree t	o the terms stated here	ein.	
Type of Credit Card: (Ple	ase Circle One)	Visa	MasterCard	Amex	Discover		
Card Number:							
Expiration Date:		CVV#:		Zip	Code:		
I hereby authorize the arcard account listed above for paying all weeks my year membership). If my	e. I understand an child is enrolled fo	d agree th or whethe	at if I choose the r he/she partion	he weekly p cipates or n	ayment option I am res ot (VIP membership ar	sponsible	
□I will be prepaying in fo					administrative fee. he weeks my child atte	nds	
∟ı vvılı pay ק	pius ali auli		ice cacii i ilua	ay piror to t	ne weeks my china alle	iius.	

Parent's Signature: _____ Date: _____