



CLASS/EVENT REGISTRATION FORM

PENTA OLYMPIC FENCING CLUB
8305 D Merrifield Avenue
Fairfax, Virginia 22031
Phone: (703) 207-1059
Fax: (703) 207-0806

NAME _____ LAST NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____
 TELEPHONE (Home) _____ DAYTIME (Work/Cell) _____
 DATE OF BIRTH _____ AGE _____ LEARNED OF POFC BY _____
 E-MAIL _____ EMERGENCY CONTACT NAME _____
 EMERGENCY TELEPHONE _____
 MEDICAL CONDITIONS (if any) _____

Class Level: Kids Club ____
 Youth/Adult: Beginner ____ Intermediate ____ Competitive ____
 [Kids Club: Ages up to 9, Youth: Ages 10 - 12, Adult/Teen: Ages 13 – Adult]

Class Type: Foil, Epee, Saber

Day: Mon ____ Tues ____ Wed ____ Thurs ____ Fri ____ Sat ____ **Begins:** _____ **Ends:** _____

TOTAL TUITION: _____ **DEPOSIT:** _____ **BALANCE:** _____

Total Payment Due will be paid by buyer in _____ Monthly payments of \$ _____ on the () 1st () 5th () 10th () 15th () 20th () 25th day of each month, commencing on ____/____/____ and continuing until the Total Payment Due has been paid in full. A \$10.00 late charge will be assessed for any fee 10 days past due date.

I/We hereby POFC to withdraw from the information furnished below under the Company's Preauthorized Payment Plan (Visa, MasterCard).

Name: _____ Billing Address: _____
 Card Type: _____ Card #: _____ Exp. Date: _____ Security Code: _____

Subject to the following conditions:

1. The items shall be drawn on or about the date or dates of the membership agreement. The transactions on your bank statement will constitute receipts for payment on your account.
2. Making payments under this plan may be revoked by the Company if any item is not paid upon presentation. At that time a payment book will be issued to you, which may incur 10% surcharge to be added to your remaining balance.
3. This plan if canceled, does not release the buyer from buyer's obligation of membership agreement/contract.
4. A service charge of \$30 minimum will be applied to all insufficient drafts, checks, electronic fund transfers, or charge cards.
5. It is my responsibility to furnish new bank or c/c information, exp. date, etc. and it will replace the old information on the account.

Date : _____ Account Holder Signature : _____

Attendance Policy

You must attend all scheduled group and private training sessions when the facility is available. Members may not attend another group class if a regularly scheduled class is missed. Private Lessons can be rescheduled ONLY if cancelled with a minimum of 24 hour notice. Payments are made in advance and are non-refundable even if you do not attend.

Facility Information/Availability

Hours of operation will be set by POFC and may be changed at its sole discretion. POFC reserves the right to make and change reasonable rules or regulations. POFC expressly reserves the right to add, to eliminate or to alter any program when deemed necessary or desirable if in POFC's judgment it is in the best interests of POFC and its students.

If the facility becomes unavailable for a short period of time (less than 30 days), previously scheduled group training will be rescheduled on dates/times determined by POFC, while private lessons will be rescheduled on dates/times mutually agreed to by you and POFC. If the facility becomes unavailable for any reason, except government closing, for an extended period of time (in excess of 5- days), at the option of POFC, membership privileges may be extended for the period that the facility was unavailable.

LEGAL NOTICES: Before you sign, please read. This Agreement is legally binding.

1. You represent that you are in good physical condition, have no physical or mental health problems that will preclude your participation in fencing activities. Specifically, you represent that you have no underlying cardiovascular, neurological or any other illness that will prevent or inhibit your participation in fencing classes in the same manner as a participant without such conditions.
2. You give consent to POFC and its representatives to obtain medical care at your expense from any licensed physician, hospital or clinic for you and/or the above mentioned student for any injury or illness that may arise during activities associated with POFC.
3. POFC represents that its personnel are trained in providing fencing programs and instruction. POFC represents that its personnel have no expertise in diagnosing, examining or treating medical conditions of any kind or in determining the effect of any specified exercise on said medical condition. You fully understand and agree that in participating in any fencing program, there is the possibility of accident, injury, disability or death. You agree to assume these risks and release, discharge and indemnify the owners, operators, the United States Fencing Association and sponsors of the premises, activities, etc. and their respective servants, agents, officers and all other participants in the stated activities of and from all claims, demands, actions, and causes of action of any sort, for injuries sustained to the member's person and/or property during the member's presence on the premises and the member's participation in the stated activities.
4. POFC generally follows Fairfax County Public Schools' policy for weather related closings. Occasionally, due to the evening and weekend operation hours, weather conditions do not warrant an automatic closing. Please call (703) 207-1059 after 8:00am for a confirmation message.
5. You agree to be bound by POFC equipment, facility and safety rules.
6. You agree to repay any specials/promotions/credit that are part of this Agreement at time of signup, if, for any reason, you do not fulfill this Agreement before the Agreement period expires.
7. You agree to pay a charge of \$30 for any checks written in payment to POFC that are returned due to insufficient funds, or for "declines" of credit cards authorized for use on monthly billings.
8. In the event that payments are not made as required, POFC shall be entitled to all costs and expenses of collection, including attorneys' fees incurred, whether or not a suit is actually filed.
9. POFC may terminate this Agreement at any time by providing oral or written notice. In the event that POFC terminates this Agreement prior to the pre-determined expiration date, POFC agrees to refund the pro-rated portion of unused and/or pre-paid fees due the member. Termination of this Agreement does not constitute any forgiveness for any outstanding fees due from the member at the time of termination.
10. The laws of the Commonwealth of Virginia will govern this Agreement. If any portion of this Agreement is held invalid or unenforceable, the remaining portions of this agreement, if applicable, shall remain in full force and effect.

11. POFC may take pictures of classes and students, and applicant authorizes and consents that those pictures are the property of POFC. Students may not take pictures of the class, student, or facility without consent from the instructor. POFC logo and its trademark are property of the company and may not be used with the company permission.

Holidays

POFC observes the following holidays and holiday weekends and will be closed: New Year’s Day, Memorial Day, Independence Day, Labor Day, and Thanksgiving, Christmas. POFC closes the last two weeks of December. POFC will be closed for the length of United States Fencing Association (USFA) National Championships and Spring Break (Fairfax County School schedule) Week. Group training falling on these days will NOT be rescheduled. Private training will be rescheduled by meeting several times in one week.

Policy: All fees are deemed earned at the commencement of the first class session.

NO refund policy. No make-ups for missed group classes.

Date _____ Student’s Signature (must be 18 years or older) _____
Printed Name _____

(IF THE STUDENT IS UNDER 18 YEARS OLD)

Parent/Guardian’s Signature _____ Printed Name _____
Date _____ Relationship to Student _____
(Please specify Mother/Father/Legal Guardian)