



## AFTER SCHOOL TRANSPORTATION AGREEMENT

PARENT'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

STUDENT'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT'S CELL: \_\_\_\_\_

STUDENT'S CELL: \_\_\_\_\_

NAME OF SCHOOL STUDENT ATTENDS: \_\_\_\_\_

PERSONS AUTHORIZED TO PICK UP: \_\_\_\_\_

\_\_\_\_\_

### PLEASE NOTE:

TO RESERVE YOUR PLACE WEEKLY, PAYMENT IS DUE ON THE FRIDAY PRECEDING THE WEEK OF ATTENDANCE. IF YOUR CHILD IS ONLY ATTENDING CERTAIN DAYS, THEN PAYMENT IS STILL DUE ON THE PRECEDING FRIDAY, AND THOSE DAYS NEED TO BE RESERVED ON THAT FRIDAY AS WELL.

\*IN THE EVENT OF NONPAYMENT BY THE DUE DATE, I  
AUTHORIZE FOYA TO CHARGE MY CREDIT CARD THE AMOUNT  
DUE + LATE FEES. \_\_\_\_\_ (initials)

CREDIT CARD TYPE: \_\_\_\_\_

NUMBER: \_\_\_\_\_

EXP DATE: \_\_\_\_\_ CID: \_\_\_\_\_

\*WE CANNOT PROVIDE SERVICE UNTIL PAYMENT IS MADE.  
\*THERE IS A \$5.00 LATE FEE.

\*NO REFUNDS \_\_\_\_\_ (initials)

I, \_\_\_\_\_, UNDERSTAND THAT FOYA  
IS A MARTIAL ARTS ACADEMY AND NOT A DAYCARE  
FACILITY. MY CHILD IS ATTENDING TO LEARN MARTIAL  
ARTS, BUILD CONFIDENCE, AND LEARN DISCIPLINE. I  
UNDERSTAND THAT FOYA IS AN ACADEMY AND A DROP IN  
FACILITY, THEREFORE MY CHILD IS FREE TO COME AND GO,  
AND IF MY CHILD STAYS, IT IS AT MY DIRECTION AND NOT  
THE ACADEMY'S.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## WAIVER AND RELEASE:

YOU, BUYER, AND STUDENT, AGREE THAT YOU ARE AWARE  
THAT THE STUDENT IS ENGAGING IN PHYSICAL EXERCISE, USE  
OF EQUIPMENT, USE OF ACADEMY'S FACILITIES, TRAINING  
AND INSTRUCTION, WHICH CAN BE DANGEROUS TO THE  
STUDENT AND COULD CAUSE INJURY. STUDENT IS  
VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES AND  
BUYER AND STUDENT ASSUME ALL RISKS OF INJURY TO  
STUDENT. BUYER AND STUDENT HEREBY WAIVE AND RELEASE  
ANY CLAIM OR RIGHT TO SUE THE ACADEMY, EMPLOYEES OR  
AGENTS FOR ANY INJURY TO STUDENT THAT MAY RESULT.

BUYER AND STUDENT HAVE CAREFULLY READ THIS WAIVER AND RELEASE, AND FULLY UNDERSTAND IT IS A RELEASE OF ALL LIABILITY AND DAMAGE OF ACADEMY FOR ANY INJURY. IT IS ALWAYS ADVISABLE TO CONSULT YOUR PHYSICIAN BEFORE UNDERTAKING A PHYSICAL EXERCISE PROGRAM, PARTICULARLY MARTIAL ARTS ACTIVITIES.

### **LOSS/DAMAGE/THEFT OF STUDENT'S PROPERTY:**

FOYA DOES NOT ASSUME ANY RESPONSIBILITY FOR THE LOSS, DAMAGE, OR THEFT OF ANY PROPERTY BELONGING TO THE STUDENT. STUDENT AGREES THAT THE ACADEMY AND ITS PERSONNEL IS NOT RESPONSIBLE FOR, OR LIABLE FOR ANY SUCH PROPERTY, EVEN IF ITS LOSS, DAMAGE, OR THEFT OCCURS ON OR ABOUT THE ACADEMY.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_