



# Application



A \$50 deposit is due upon submitting this application- refundable up to 1 week prior to party date.



\_\_\_\_\_ (initial)

Requested Party Date and Times:

1st Choice:  Sat.  Sun. \_\_\_\_/\_\_\_\_/\_\_\_\_

2nd Choice:  Sat.  Sun. \_\_\_\_/\_\_\_\_/\_\_\_\_

12:30- 2:00pm  3:00- 4:30pm  5:00pm- 6:30pm  12:30- 2:00pm  3:00- 4:30pm  5:00pm- 6:30pm

Name of the Birthday  **BOY** /  **GIRL** \_\_\_\_\_ Age celebrating \_\_\_\_\_

Parent/ Guardian name(s): \_\_\_\_\_

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

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

Has your child taken Martial Arts classes before?  Still is!  Yes, in the past!  No

How did you hear about our parties? \_\_\_\_\_

Please explain any health concerns we should know about: \_\_\_\_\_

**NOTE: Each guest is required to have a signed waiver in order to participate. \_\_\_\_\_ (initial)**

## Party Package Fees and Upgrade Options:

- Party (\$195) - use of facility, 45 minute workout, invitations, guest passes, demo board, sword cake cutting
- Extra participants (\$5 per participant after the first 15 kids)\*\*
- Master Schafer to run the party (\$100)
- NERF WARS (\$50)——> We have many nerf guns on hand but recommend bringing your own!
- Filled Favor Bags (\$5/person) Quantity needed (roughly)\*\* \_\_\_\_\_
- Additional facility use (\$25/30 minutes)

**OR**

ATA to come to YOUR party location: choose →  Staff member (\$100) **or**  Master Schafer (\$150)

\*\*We know life happens! Child/gift bag overages can be adjusted the day of the event when balance is paid.

## Release and Assumption of Risk Agreement

I understand this program, by the nature, can present circumstances that place some risk of injury to myself and others while participating in such training activities. I understand the nature and content of the activity listed and am aware of the potential dangers incidental to engaging in the program. I agree to release, indemnify, defend and hold Schafer's ATA Martial Arts, it's officers and employees harmless and free from any and all liability resulting directly or indirectly from participation in the program, including but not limited to liability for any and all demands, damages, claims, suits, liens and judgements, including costs and attorneys' fees, of whatever nature. I have carefully read this Indemnity, Release, Waiver, and Assumption of Risk Agreement and fully understand its contents and understand that it shall be binding upon me, my heirs, successors and assigns. I am aware that this is a full release of liability and sign it of my own free will.

Signature: \_\_\_\_\_ Relationship to Student \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only:

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

Total owed: \_\_\_\_\_ Deposit: \_\_\_\_\_

Party Time: \_\_\_\_\_

Balance due day of party: \_\_\_\_\_

Staff member booked: \_\_\_\_\_

check  cash  credit card

