



Training Application & liability release form

PLEASE COMPLETE THIS FORM AS DETAILED AS POSSIBLE.WRITE LEGIBLY.THESE PARTICULARS ARE THAT OF THE STUDENT TRAINING, SHOULD THERE BE A MEMBER APPLYING UNDER THE AGE OF 21, PARENT/GUARDIAN CONTACT DETAILS & SIGNATURE ARE REQUIRED. THIS FORM MUST ACCOMPANY YOU UPON ATTENDING YOUR NEXT CLASS AFTER YOUR TRY OUT. YOU ONLY RECEIVE 1 FREE TRY OUT.

| Personal Information | | | | | |
|--|--|--|--|--|--|
| Full name & surname | | | | | |
| Identity number Age T-shirt Size | | | | | |
| Postal Address | | | | | |
| | | | | | |
| Tel (H)(C) | | | | | |
| BBM Pin: Email | | | | | |
| Work place Occupation | | | | | |
| Health History: Physical disabilities/allergies/illnesses | | | | | |
| Training Experience: Any previous Martial Arts training experience? | | | | | |
| | | | | | |
| Duration who with | | | | | |
| Explain your goals in your training | | | | | |
| | | | | | |
| IT IS A REQUIREMENT THAT AS A MEMBER OF COMBATCOACHING.COM YOU SIGN A DEBIT ORDER TO ENSURE THAT YOUR PAYMENTS ARE PAID ON TIME EACH MONTH AND THAT YOU ABIDE BY THE MEMBERSHIP OPTION TERMS AND CONDITIONS. | | | | | |
| Banking Details | | | | | |
| Name of account holder: | | | | | |
| BankBranch CodeI HEREBY AUTHORIZE MORNÉ SWANEPOEL'S COMBATCOACHING.COM TO COLLECT THE MONTHLY PREMIUM AS STIPULATED BY MY MEMBERSHIP AGREEMENT OPTION. | | | | | |
| I declare that the information supplied above is true & correct (Initial) | | | | | |

Membership Terms & Conditions

PLEASE READ EACH OF THE FOLLOWING POINTS CAREFULLY AND INITIAL AFTER EACH ONE. BY INITIALING AND SIGNING THE TERMS AND CONDITIONS YOU DECLARE THAT YOU <u>UNDERSTAND</u> AND AGREE TO ABIDE BY THE MEMBERSHIP TERMS AND CONDITIONS.

PLEASE TICK AND INITIAL MEMBERSHIP OPTION YOU CHOOSE TO FOLLOW:

ANNUAL MEMBERSHIP

Upon agreeing to the Annual Membership, the member acknowledges and agrees to the following:-

- Membership fees will remain unchanged for a period of 12 (Twelve) months commencing at date of signature hereof.
- On the anniversary of the membership, the membership will renew for a further period of 12 (Twelve) months, safe where the member has provided notification to CombatCoaching.com a month in advance of his/her intention to cancel the membership.
- On the anniversary of the membership, fees will increase by 10% (Ten Percent).
- The member acknowledges and understand that this is a fixed 12 (Twelve) month contract and accordingly he/she may not terminate the membership within the 12 (Twelve) month period, safe for the notice which may be provided in terms of
- The member acknowledges and understands that he/she may not migrate the membership to a month to month membership prior to expiration of the 12 (Twelve) month period. (Initial)

MONTH TO MONTH MEMBERSHIP (this is not a pay-as-you-go option)

Upon agreeing to the Month to Month Membership, the member acknowledges and agrees to the following:-

- Membership fees will remain unchanged for a period of 12 (Twelve) months commencing at date of signature hereof.
- On the anniversary of the membership, fees will increase by 10% (Ten Percent).
- The member acknowledges and understand that this is a month to month contract and accordingly he/she may terminate the membership by providing 1 (One) month's notice of intention to terminate.
- The member acknowledges and understands that he/she may migrate the membership to an Annual membership at any time. (Initial)
- 3 Late payments and returned debit orders will result in a penalty/admin fee being charged. (Initial____)
- Monthly payments in terms of the membership are due irrespective of class attendance.(Initial)
- Members must ensure that they become familiar with the physical nature of CombatCoaching.com training. (Initial____
- The member acknowledges that he/she does not presently suffer from any medical disabilities or problems that will prevent the member from participating in CombatCoaching.com training or that will endanger the member's health or the health of other members. The member acknowledges that he/she is physically and mentally fit to participate in a course of Martial Arts instruction and free of any communicable/infectious diseases. (Initial___)
 In the event that a member develops any medical problems, the member undertakes to consult a
- medical doctor in order to obtain approval for the member to continue participation in CombatCoaching.com training. (Initial)
- ised personnel to or advisable and
- thers which may Coaching.com and itial)

| 9 | perform any acceptable medical procedures on the member deemed necessary agrees to bear the expenses of any transportation or procedures. (Initial) | | | | |
|-----------|---|------|--------|------|--|
| Signed at | | this | day of | , 20 | |
| Member | · signature | | | | |