



Emerald City Karate FALL 2019 – SPRING 2020 Transported After School Karate Program

Welcome to Emerald City Karate's Transported After School Karate Program

Our Program offers a safe environment for your child to learn the important life skills to help ensure their success at school, in the dojo, and later in life. Our goal is to help our students live life at the highest level! This program is the best way to maximize the potential of your child during the after-school time slot.

Basic Information about our After-School Program

- Our ASP program is for ages 6.5 and 11 (Entering 1st grade in Fall 2019)
- Our ASP program runs **Mondays through Thursdays between 2:25 PM – 5 PM and Wednesdays between 1:10 PM – 5 PM.**
- Every student is required to attend **at least 2 classes per week** in order to stay up to date on the current curriculum requirements. (You can choose up to 4 classes a week!)
- **NO Experience Needed!** You'll be able to follow along with our classes and have a blast even if you've never trained a day in the martial arts!
- **Every student will take a belt test at the end of each trimester** (Fall, Winter, and Spring) and Parents are welcome to watch the belt test to see the **fruit** of your child's hard work!

What makes our program outstanding?

- World Class Martial Arts Instruction
- Exciting Games to reinforce teamwork and focus
- Arts, Crafts, and mini Science Projects
- Mini Japanese Language Lessons
- Daily Inspirational 'Mat Chats' to instill outstanding behavior in our students
- Quiet Time / Reading / Homework Time
- Our Program is calculated weekly so you won't pay for School Break Weeks!

Transportation Options & Pick up locations at schools

The Emerald City Karate Dojo Vans currently pick up from:

- **Daniel Bagley Elementary** (East side of school on Stone Ave)
- **Whittier Elementary** (By the playground in the Bus Pick Up Area on 13th Ave)
- **West Woodland Elementary** (Pick up on Fourth Ave by the Bus Loading Area)
- **Cascadia Elementary** (South side of school)
- **Broad-View Thompson Elementary** (West side of school on Greenwood Ave N)

Our instructors lead walking groups from:

- **Greenwood Elementary** (Pick up from the East gate of the school near the playground.)

We'll do our best picking up students as quickly as possible by a van, but students need to have patience and wait inside the school in a safe place or in the meeting area until we arrive. If your school is not currently listed, please email us at emeraldcitykarate@gmail.com to inquire about the possibility of setting up our transportation service from your child's school.

2019 – 2020 Schedule

Our program runs in conjunction with the Seattle Public School System's calendar.

- **Fall Session 15 weeks** (Sep 4th – Dec 19th)
- **Winter Session 11 weeks** (Jan 6th – March 26th)
- **Spring Session 11 weeks** (March 30th – June 18th)

Dates without After school program Karate

- Veterans Day - November 11th
- Conference & Thanksgiving Break – November 25th – 28th
- Winter Break – December 23rd – January 3rd
- MLK Jr. Day – January 20th
- Day between semesters – January 28th
- Mid-Winter Break – February 17th – 21st
- Spring Break – April 13th – 17th
- Memorial Day – May 25th

More Information about our Program

Our After-School Karate program provides the benefits of traditional martial arts programs like focus, respect, and self-control while also teaching practical self-defense methods for the ever-changing world. We always operate in a fun and supportive environment so the kids can enjoy their journey towards black belt, one step at a time!

Things parents should know:

- **Belt Tests** will be held at the end of each quarter covering material taught in class. **If your child can't make it to the belt test, we'll need to schedule a make-up belt test on the weekend. There will be a \$30 per child fee for private make-up tests.**
- In order to qualify for the belt test, **students will need to earn all of their stripes on their belt.**

These small steps will help them learn to set and achieve goals.

- **Required Equipment:** Karate Uniform with belt, Training Gloves, and Dojo Bag. These items are included in our "Equipment Package" at a discounted price. See Below. If your child loses them, you'll need to purchase new items at the dojo.

Tuition for 2018 – 2019

2 Days	3 Days	4 Days	Early Release Wednesday Fees
\$59 per week	\$79 per week	\$99 per week	\$10 per day

- Our Program is calculated weekly so you won't pay for School Break Weeks!
- If you choose Wednesday class, there will be an extra \$10/Day fee because of the extra hours on early release days.
- Additional Siblings will receive a 10% discount.
- ASP students will receive 25% off on our school year day camps.

- Payments are processed via EFT directly from your bank account (you must provide a voided blank check) or through a credit card on file on the 1st week of every month.
- Payments that do not process or are declined are automatically assessed a \$25 processing fee and a \$25 late fee.
- You may cancel with 2 weeks notice with written request.

Registration and Policies

Registration

Fill out the registration form below. Registration forms can be found on our website or at the dojo. Registration forms include important Allergy / Medical Treatment / and various Authorization Forms.

***Paperwork must be completed and turned in before your child's first day of the program or you risk the chance of losing your spot in our After-School Program. (Space is Limited)**

Cancellation & Refund Policy

You may cancel with 2 weeks notice via written request. Payments will continue until you notify ECK. Payments are refundable if written notice of cancellation is received by Emerald City Karate's office on time. No fee reductions will be made for late arrivals, early departures, or missing class. It is understood that in the case of homesickness, dismissal, or voluntary withdrawal, there will be no refund of fees. If it is deemed advisable to send a student home for medical or other reasons, a prorated portion of the fees may be refunded at Emerald City Karate's Discretion.

Sign out Procedures

- Every student must be signed out each day at the front desk by an approved parent or guardian. All pick up arrangement changes must have prior notice.
- On Wednesdays, we'll study other subjects like arts and crafts at the Greenwood Senior Center. If you need to pick your child up early, please contact us ahead of time so we can plan accordingly.
Greenwood Senior Center (525 N 85th St, Seattle, WA 98103)

Late Pickup Policy

Parents are requested to pick up their child no later than 5:15 PM. Afterward, late charges may apply. (\$25 per 10 minutes late) Please let us know as soon as possible if, for some reason, you can't pick up your child on time.

Absence and Illness Policy

Parents are requested to keep their children at home when they have a fever and/or if they are sick. Parents are requested to notify us by NO LATER THAN 12 PM if their child will not be available for pickup from school. A fee of \$25.00 will be charged if parents/guardians do not notify Emerald City Karate that their child will be absent. **THIS IS VERY IMPORTANT** because if we wait for an unexpectedly absent student, it also makes us late for picking up the next group.

- Unfortunately, there are no refunds for days or weeks that a student cannot attend due to illness or personal vacation. They are welcome to attend an evening class as a make-up as space allows. A friend cannot replace an absent student; all students must be registered to participate.

----- Please retain the previous sections of this form for your reference and submit the papers below -----



Emerald City Karate After School Program Registration 2019-2020

Registration Procedures

1. Please read our after-school program information carefully before you register as it contains important information, policies, and procedures related to our program.
2. Fill out the registration form.
3. Mail or hand this form in to Emerald City Karate.

Child's Name: _____
(First) (Last) (Nickname)

Date of birth: ____/____/____ Age: _____ Grade: _____ Gender: Male / Female

Name of School: _____

Home Address: _____ City: _____ Zip code: _____

Parent/Guardian Name (First & Last): _____ Relationship: _____

Cell phone: _____ Email: _____

2nd Parent/Guardian Name (First & Last): _____ Relationship: _____

Cell phone: _____ Email: _____

Does your student have any special physical, behavioral, learning and/or other needs our staff should be aware of? If so, please describe details: _____

How did you hear about us? _____

EMERGENCY CONTACTS

The Parent/Guardian named above will be contacted first in case of emergency (after 911). Please list additional parents, guardians, and others you would like to contact if we cannot reach you.

Name	Relationship	Primary Phone	Cell Phone

PICK UP AUTHORIZATION AND INFORMATION

Please list all individuals (Including yourself) who are authorized to pick up your child.

Name	Relationship

Choose Your After-School Program Class Schedule:

- 2 Days a Week:** *(Most Popular)* Please circle **TWO** days below
Mondays | Tuesdays | Wednesdays | Thursdays
- 3 Days a Week:** Please circle **THREE** days below
Mondays | Tuesdays | Wednesdays | Thursdays
- 4 Days a Week:**

Payment Options for classes:

Payments will be charged monthly according to the number of training weeks each month. You can choose ETF or Credit Card for the payments.

ETF | Bank Name: _____

Please supply us with a Voided Check for payments paid from your bank's checking account.

Visa MasterCard Card # _____ Exp. Date _____ / _____

Verification Code _____ Name on the Card _____

- I accept full responsibility for payment of sessions and classes enrolled in. Monthly payments are charged on the 1st week of the month.
- I consent to ECK keeping my signature on file to initiate a debit or credit card transaction on an ongoing basis in the amount due for monthly payments and fees.
- I accept a \$25 fee for any rejected debit from your financial institution and any late or no-show fees per our policy.
- I hereby authorize recurring monthly charges to my debit or credit card, checking or savings account for monthly payments or fees incurred. A receipt for each payment will be emailed. I agree that no reminders or prior notification will be given unless the date or payment amounts change. I agree that a late pick-up fee (\$25 per 10 minutes late) and no-notice absence fee (\$25 per occurrence) will be charged at the time of incidence.
- I accept that payments will continue until I notify ECK otherwise in writing and understand and agree to the cancellation policy.

Print Name _____

Signature _____

X _____

X _____

Please Select the Correct Uniform Size for your Child:

All karate students in our After-School Program are required to have a correctly sized uniform, training gloves, and a dojo bag to carry their equipment in. These can be purchased separately or at the discounted price of \$59.99 in our 'Equipment Package' below.

Karate Uniform Size Chart:

- Size 000 (3 ft. – 3' 5")
- Size 00 (3' 5" ft. – 3' 10")
- Size 0 (3' 10" ft. – 4' 3")
- Size 1 (4' 3" ft. – 4' 8")
- Size 2 (4' 8" ft. – 5' 1")
- Size 3 (5' 1" ft. – 5' 6")

Note: Initial below to acknowledge that you have read and agreed to each item. In order for a child to attend camp, each item **MUST be initialed** by a parent/guardian.

General authorizations: I confirm the authorizations and consent to the details within this document, including, but not limited to medical treatment, field trips, activity participation, photos of child and emergency contacts.

Parent/guardian initials _____

Authorization of treatment: I give permission for Emerald City Karate staff to provide any medical assistance they deem appropriate for my child, named below. I also give permission for any emergency personnel to treat my child in the event of an emergency and understand that I will be responsible for all medical expenses that may be incurred as a result.

Parent/guardian initials _____

Media release: I understand that photos, videos and audio recordings of my child may be taken during after school programs. I hereby authorize Emerald City Karate and its personnel to take, use and publish photographs, video and audio records of my child for education, public relations, marketing and purposes related to Emerald City Karate.

Parent/guardian initials _____

General release: I acknowledge that there are natural hazards associated with after school programs and related activities in both indoor and outdoor settings. I hereby affirm that my child is in good health and physically capable of performing the required activities of class. In consideration of Emerald City Karate accepting my child into a program, I hereby assume all risks associated with my child's attendance and participation. I will indemnify, hold harmless and release Emerald City Karate, their employees, volunteers, interns and agents from all liability, actions, causes of action,

debts, claims, demands or other liability of every kind and nature whatsoever which may arise from or in connection with my child's participating in any activities sponsored through Emerald City Karate, including, and without limitation, any damages or injuries which may be sustained while my child is in class. I understand and agree that this release is intended to be as broad and inclusive as is permitted by the laws of the State of Washington, and that if any portion of it is held to be invalid, I agree that the remaining terms shall continue to be in full legal force and effect.

Parent/guardian initials _____

Transportation Authorization

I hereby authorize Emerald City Karate, 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 Emerald City Karate.

Parent/guardian initials _____

Handbook and ASP policies: I have read Emerald City Karate's After School Program Information outlining all program policies and procedures and understand and will comply with all program policies and procedures. I understand that should my child violate any policy or procedure, or act in a manner that is unsafe for my child, other participants or staff, my child may be excluded from the program. Accordingly, I have told my child to obey all directions of staff, to comply with all safety instructions and to refrain from unsafe practices. If my child has to be removed from the program, I will *not* be entitled to a refund.

Parent/guardian initials _____

I HAVE READ THE AGREEMENT CAREFULLY AND HAVE FULLY UNDERSTOOD THE CONTENT AND CONSEQUENCES OF THIS AGREEMENT. I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE.

Student's full name(print): _____

Parent/guardian's full name (print): _____ Relationship to minor: _____

Signature of parent/guardian: _____ Date: _____