



MARCELO ALONSO BRAZILIAN JIU-JITSU MEMBERSHIP AGREEMENT

PLEASE PRINT CLEARLY!

Name _____ Email _____
 Phone (hm) _____ (wk) _____ (cell) _____
 Address _____ City/Zip _____
 Birthdate _____ Drivers Lic # _____ Employer: _____
 Emergency contact: Name _____ Tel: _____ Tel: _____

Payment	Tuition
Monthly Direct Debit	\$120/month (adult unlimited classes) \$100 (Kids)
Month 2Mo Cash/Check	\$200/month (due by 5 th day of month)
Pre-Pay One Year	\$1200 Save \$240
Pre-Pay Six Months	\$720
Pre-Pay Three Months	\$ 450
Boxing Classes	\$100/month without BJJ - \$40/month with BJJ
Weekly / Daily rates	\$75 /week - \$30 /day (paid in advance)
Registration Fee	\$100 (one time charge)
Insurance	Annual premium: \$25 Estimated

Membership begins: JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC **2011 2012 2013**

Direct Debit Auto-Payment/Electronic Funds Transfer (EFT) Authorization:

I authorize Marcelo Alonso and/or his assigns to deduct payments from my bank/credit card company by the method indicated below and to post charges on my account as agreed. Cancellation of membership EFT charges must be requested at least thirty (30) days prior to auto-payment date or of terminating participation in classes.

[] VISA/Master Card _____ Exp.date _____

[] Checking Account Number _____ Routing Number _____

Payment Amount: \$ _____ Payment Date: _____ day of month

Additional Terms of Agreement All participants at the Academy must agree to follow the **RULES OF SAFETY AND CONDUCT** as provided to the applicant. Failure to comply with these Rules may result in termination of membership privileges.

I have read and understand all of the provisions of this Agreement, including the additional terms and rules of the Academy. I agree to be bound by all of the terms contained in this Agreement.

Member signature _____ Date _____

Office use: Monies Received \$ _____ in payment of _____

