

# U.S. TAE KWON DO COLLEGE AFTER SCHOOL MARTIAL ARTS PROGRAM



**DEAR MOM AND DAD,**

YOU KNOW HOW DIFFICULT IT IS TO FIND A QUALITY AFTER SCHOOL PROGRAM. MOST PROGRAMS ARE LITTLE MORE THAN GLORIFIED BABYSITTING SERVICES WITH NO STRUCTURED PLAN TO IMPROVE YOUR CHILD'S HEALTH, SELF-ESTEEM, BEHAVIOR, CONFIDENCE, FOCUS, MANNERS, LEADERSHIP SKILLS OR SELF-DISCIPLINE. WORRY NO MORE—YOUR CHILD CAN ENJOY A FUN, SAFE, STRUCTURED, TOP-QUALITY MARTIAL ARTS PROGRAM AT U.S. TAE KWON DO COLLEGE!

AT OUR AFTER SCHOOL MARTIAL ARTS PROGRAM YOUR CHILD WILL GET INTO GREAT SHAPE PHYSICALLY AND LEARN VALUABLE SELF-DEFENSE SKILLS. THAT'S JUST THE BEGINNING.

## **YOUR CHILD WILL ALSO DEVELOP**

- BETTER MANNERS
- SELF-DISCIPLINE
- GOAL-SETTING SKILLS
- TIME-MANAGEMENT SKILLS
- LEADERSHIP SKILLS
- STUDY SKILLS
- IMPROVED BEHAVIOR AND MORE RESPECT
- CONCENTRATION AND FOCUS
- WEIGHT LOSS
- REDUCED STRESS AND ANXIETY

## **A STRUCTURED LEARNING ENVIRONMENT**

UNLIKE WITH MANY OTHER PROGRAMS, AT U.S. TAE KWON DO COLLEGE YOUR CHILD IS ALWAYS SUPERVISED AND REQUIRED TO FOLLOW A STRICT CODE OF BEHAVIOR WITH A CLEAR PURPOSE: SUCCESSFUL LEARNING AND CHARACTER DEVELOPMENT. OUR ENTIRE PROGRAM IS CAREFULLY PLANNED OUT AND STRUCTURED SO THAT YOU CAN SEE HOW STEP-BY-STEP YOUR CHILD WILL GAIN IMPROVED SELF-ESTEEM, BEHAVIOR, CONFIDENCE, FOCUS, MANNERS, LEADERSHIP SKILLS AND SELF-DISCIPLINE.

## **FUN DAILY ACTIVITIES. YOUR CHILD WILL PARTICIPATE IN**

- MARTIAL ARTS CLASSES
- ENGAGING LIFE SKILLS LESSONS FOCUSING ON PERSONAL SUCCESS (COVERING EVERYTHING FROM RESPECT TO DEALING WITH BULLIES AND STRANGERS)
- READING AND STUDY TIME
- INVIGORATING EXERCISE AND PLAY TIME WHERE CHILDREN ARE CAREFULLY SUPERVISED AS THEY UNWIND.

**YEAR-BY-YEAR CURRICULUM ALL THE WAY TO BLACK BELT.** AT U.S. TAE KWON DO COLLEGE, WE'RE PROUD TO SHOW YOU OUR ENTIRE CURRICULUM THAT WILL HELP YOUR CHILD DEVELOP THE MENTAL, PHYSICAL AND EMOTIONAL SKILLS NEEDED TO ADVANCE ALL THE WAY FROM NOVICE NO BELT UP TO BLACK BELT!

BOYS AND GIRLS WHO ENROLL IN TAE KWON-DO STAND HEAD AND SHOULDERS ABOVE THEIR PEERS WHEN IT COMES TO CONFIDENCE, SELF-ESTEEM, SUCCESS SKILLS, LEADERSHIP SKILLS AND A POSITIVE VIEW OF THEMSELVES AND THE WORLD AROUND THEM.

THINK HOW IMPORTANT THAT CONFIDENCE AND POSITIVE SELF-IMAGE ARE FOR KIDS TO BE ABLE TO "SAY NO" TO THE NEGATIVE PEER PRESSURES THEY FACE EVERY DAY, AND "YES" TO THE POSITIVE CHALLENGES THAT LEAD TO SUCCESS IN LIFE. MARTIAL ARTS REALLY CAN POSITIVELY CHANGE YOUR CHILD'S LIFE FOREVER!

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## STUDENT INFORMATION/ENROLLMENT FORM

STUDENT NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SCHOOL GRADE: \_\_\_\_\_

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

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

PARENT'S NAME: \_\_\_\_\_ PARENT'S EMAIL: \_\_\_\_\_

ADDRESS:  SAME \_\_\_\_\_

PHONE NUMBER (H): \_\_\_\_\_ WORK: \_\_\_\_\_ CELL: \_\_\_\_\_

NAME OF THE SCHOOL ATTENDING: \_\_\_\_\_

SCHOOL'S ADDRESS: \_\_\_\_\_

SCHOOL'S TELEPHONE NUMBER: \_\_\_\_\_

TEACHER'S NAME: \_\_\_\_\_

RELEASE TIME: \_\_\_\_\_

### ADDITIONAL INFORMATION:

ALLERGIES: \_\_\_\_\_

### EMERGENCY CONTACT

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

RELATION TO THE STUDENT: \_\_\_\_\_

FAMILY PHYSICIAN'S NAME: \_\_\_\_\_

INSURANCE COMPANY NAME: \_\_\_\_\_

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

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

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



## TUITION & FEES

Tuition for the program will be \$ (see below) weekly. Tuition will be drafted automatically via credit card/ACH check drafts every Friday for the next week's tuition. Tuition payments that are returned for any reason shall result in a \$40 return payment fee.

**\$50 REGISTRATION FEE PER CHILD  
INCLUDES UNIFORM  
"NOT APPLICABLE TO EXISTING STUDENTS"**

<b>A- 3-5 Days</b>	<b>\$150</b> (Pick up and Tae Kwon Do)
<b>B- 2 Days</b>	<b>\$130</b> (Pick up and Tae Kwon Do)

**2<sup>ND</sup> CHILD GETS 10% DISCOUNT**

\*All Students enrolled in 3-5 days after school pick up will get **FREE** Teacher Work Day/ Parent Teacher Conference Day camp if needed **and** if more than 5 students enroll in the service. (8 AM – 4 PM)

All programs will follow our Black Belt curriculum. Month by Month students will be climbing up the belt rank and develop confidence. Through Martial Arts your child will develop the mental, physical, and emotional skills needed to advance from novice all the way to Black Belt with confidence.

Think how important that confidence and positive self-image are for kids to be able to "Say No" to the negative peer pressures they face every day, and "Yes" to the positive challenges that lead to success in life. Martial Arts really can positively change your child's life forever through smaller daily investment.

### CREDIT CARD INFORMATION

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

**EXPIRATION DATE:** \_\_\_\_\_

**CVC CODE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

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## GENERAL POLICIES

### 1. HOLIDAY SCHEDULE

THE AFTER-SCHOOL MARTIAL ARTS PROGRAM WILL BE CLOSED ON ALL FEDERAL HOLIDAYS, THANKSGIVING AND CHRISTMAS.

### 2. INCLEMENT WEATHER SCHEDULE

THE AFTER-SCHOOL MARTIAL ARTS PROGRAM WILL BE CLOSED IN THE EVENT THAT THE PUBLIC-SCHOOL SYSTEMS ARE CLOSED FOR THE DAY DUE TO INCLEMENT WEATHER CONDITIONS. LATE SCHOOL OPENINGS DO NOT AFFECT OUR PROGRAM. IF YOUR PARTICULAR SCHOOL IS NOT OPENING WITH OTHER SCHOOL SYSTEMS, PLEASE NOTIFY US IMMEDIATELY SO WE DO NOT ATTEMPT TO PICK UP STUDENTS FROM CLOSED SCHOOLS. **PLEASE NOTIFY US IF WE DO NOT NEED TO PICK YOUR CHILD UP FOR ANY REASON. WE NEED TO FOLLOW A SET SCHEDULE AND IF WE ARE NOT MADE AWARE OF ABSENCES, THIS CAUSES LATE PICKUPS AT OTHER SCHOOLS. WE WILL CHARGE \$10 PER CHILD IF WE ARE NOT NOTIFIED AHEAD OF TIME.**

### 3. TRANSPORTATION

STUDENTS WILL BE PICKED UP AND TRANSPORTED TO THE U.S. TAE KWON DO COLLEGE AT A SPECIFIED TIME. DRIVERS CANNOT BE HELD ACCOUNTABLE FOR STUDENTS WHO ARE NOT AT THEIR PICK-UP POINT AT THEIR DESIGNATED TIME. OUR PICK-UP SCHEDULE HAS BEEN CAREFULLY PLANNED OUT TO PICK UP STUDENTS IN AN EFFICIENT AND TIMELY FASHION. DRIVERS WILL USE REASONABLE JUDGMENT IN WAITING, BUT WE CANNOT GUARANTEE A SPECIFIC WAITING PERIOD FOR YOUR CHILD/STUDENT.

### 4. MARTIAL ARTS

AS PART OF THE AFTER-SCHOOL MARTIAL ARTS PROGRAM, STUDENTS ARE REQUIRED TO TAKE PART IN OUR MARTIAL ARTS PROGRAM. OUR PROGRAM HAS A NATURAL ORDER OF PROGRESSION THROUGH BELT PROMOTIONS. NEW STUDENTS WILL ENTER AS A NO BELT AND ATTAIN PROMOTIONS THROUGH THE INSTRUCTION PROCESS. IT TAKES ABOUT 2-3 MONTHS FOR A STUDENT TO BE ELIGIBLE FOR BELT TESTING. ALSO, THERE IS A TESTING FEE (\$60) FOR PROMOTION TESTS. SPARRING GEAR IS RECOMMENDED WHEN THEY REACH YELLOW BELT.

### 5. PARENTS RESPONSIBILITY

PLEASE NOTIFY YOUR SCHOOL OF YOUR CHILD'S PARTICIPATION IN OUR PROGRAM. PLEASE INFORM THEM OF POSSIBLE BRIEF "HOLDOVER PERIODS" FOR PICK UP FROM THE U.S. TAE KWON DO COLLEGE. WE PICK UP FROM SEVERAL SCHOOLS AND CANNOT BE AT SCHOOLS AT THE SAME TIME WHEN SCHOOL IS DISMISSED. WE CAREFULLY PLAN AND ORGANIZE OUR PICK-UP SCHEDULE TO AVOID LATE PICKUP.

**PLEASE NOTIFY US IN THE EVENT YOUR CHILD IS SICK FROM SCHOOL OR GOES HOME EARLY. THIS IS VERY CRITICAL. WE DO NOT WANT TO BE WAITING FOR CHILDREN WHO ARE NOT AT SCHOOL. PLEASE CALL US AS EARLY AS POSSIBLE.**

### 6. PICK UP TIME

PLEASE PICK UP YOUR CHILDREN NO LATER THAN 6:30 P.M. IF YOU ARE RUNNING LATE, **PLEASE CALL US.**

### 7. SNACKS

WE DO NOT PROVIDE SNACKS. PLEASE BE SURE AND PACK YOUR CHILD EXTRA FOOD AND REFRESHMENTS.

2930- A PATRICK HENRY DRIVE FALLS CHURCH VA, 22044 (703) 942- 8826

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## WAIVER

**LIABILITY RELEASE.** FOR GOOD AND VALUABLE CONSIDERATION, THE RECEIPT AND SUFFICIENCY OF WHICH ARE HEREBY ACKNOWLEDGED, I \_\_\_\_\_, AS PARENT OR LEGAL GUARDIAN OF \_\_\_\_\_, A MINOR (HEREINAFTER "MINOR"), HEREBY GRANT THE PERMISSION NECESSARY TO ALLOW MINOR TO PARTICIPATE IN THE ABOVE AFTER SCHOOL MARTIAL ARTS PROGRAM TO BE CONDUCTED BY U.S. TAE KWON DO COLLEGE, INC. I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, FURTHER AGREE TO RELEASE AND TO HOLD HARMLESS U.S. TAE KWON DO COLLEGE, INC., THE HOSTING SITE, (U.S. TAE KWON DO COLLEGE SCHOOL) ON WHOSE PREMISES THE AFTER SCHOOL MARTIAL ARTS PROGRAM WILL OCCUR (HEREINAFTER THE "LOCATION"), THE AFFILIATES OF U.S. TAE KWON DO COLLEGE INC., THE LOCATION, AND THE RESPECTIVE DIRECTORS, OFFICERS, REPRESENTATIVES, MEMBERS, AGENTS AND EMPLOYEES OF U.S. TAE KWON DO COLLEGE AND THE LOCATION AND THEIR RESPECTIVE AFFILIATES (HEREINAFTER COLLECTIVELY "RELEASEES") FROM ANY AND ALL LIABILITY, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE FOR ANY CLAIM, JUDGMENT, LOSS, LIABILITY, COST AND EXPENSES (INCLUDING, WITHOUT LIMITATIONS, ATTORNEY'S FEES AND COSTS) ARISING OUT OF OR CONNECTED WITH THE AFTER SCHOOL PROGRAM, INCLUDING ANY CLAIM ARISING OUT OF OR CONNECTED WITH ANY ILLNESS OR INJURY (MINIMAL, SERIOUS, CATASTROPHIC AND/OR DEATH) THAT THE MINOR MAY INCUR OR SUSTAIN DURING THE AFTER SCHOOL PROGRAM, ALL ACTIVITIES ASSOCIATED WITH THE AFTER SCHOOL MARTIAL ARTS PROGRAM AND WHILE TRAVELING TO AND FROM THE SITE FOR THE AFTER SCHOOL MARTIAL ARTS PROGRAM WHETHER OR NOT THE AFTER SCHOOL MARTIAL ARTS PROGRAM ACTUALLY OCCURS. I FURTHER EXPRESSLY AGREE TO INDEMNIFY AND HOLD HARMLESS RELEASEES AND RELEASEES' HEIRS, SUCCESSORS, ASSIGNS, EXECUTORS AND ADMINISTRATORS AGAINST LOSS FROM ANY FURTHER CLAIMS, DEMANDS OR ACTIONS THAT MAY SUBSEQUENTLY BE BROUGHT BY MINOR OR BY ANY OTHER PERSONS ON THE ACCOUNT OF DAMAGES OF ANY CHARACTER RESULTING TO MINOR IN ANY WAY FROM THE FOREGOING ACTIVITIES. I FURTHER AGREE TO REIMBURSE AND TO MAKE GOOD TO RELEASEES ANY LOSS OF COSTS RELEASEES MAY HAVE TO PAY AS A RESULT OF ANY SUCH ACTION, CLAIM, OR DEMAND. I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, HEREBY WARRANT THAT I HAVE READ THIS LIABILITY RELEASE IN ITS ENTIRETY AND FULLY UNDERSTAND ITS CONTENTS. I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, AM AWARE THAT THIS LIABILITY RELEASE RELEASES RELEASEES FROM LIABILITY AND CONTAINS AN ACKNOWLEDGEMENT OF MY VOLUNTARY AND KNOWING ASSUMPTION OF THE RISK OF INJURY OR ILLNESS. I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, FURTHER ACKNOWLEDGE THAT NOTHING IN THIS LIABILITY RELEASE CONSTITUTES A GUARANTEE THAT THE AFTER-SCHOOL PROGRAM WILL OCCUR. I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, HAVE SIGNED THIS DOCUMENT VOLUNTARILY AND OF MY OWN FREE WILL.

**MEDICAL RELEASE.** I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, ACKNOWLEDGE AND AGREE THAT SUCH PARTICIPATION SUBJECTS MINOR TO POSSIBILITY OF PHYSICAL ILLNESS OR INJURY (MINIMAL, SERIOUS, CATASTROPHIC AND/OR DEATH) AND THAT I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, ACKNOWLEDGE THAT THE MINOR IS ASSUMING THE RISK OF SUCH ILLNESS OR INJURY BY PARTICIPATING IN THE AFTER SCHOOL PROGRAM. IN THE EVENT OF SUCH ILLNESS OR INJURY, I AUTHORIZE U.S. TAE KWON DO COLLEGE, INC. TO OBTAIN NECESSARY MEDICAL TREATMENT OF THE MINOR AND HEREBY, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, RELEASE AND HOLD HARMLESS RELEASEES IN THE EXERCISES OF THIS AUTHORITY. I FURTHER ACKNOWLEDGE AND UNDERSTAND THAT I WILL BE RESPONSIBLE FOR ANY AND ALL MEDICAL AND RELATED BILLS THAT MAY BE INCURRED ON BEHALF OF THE MINOR FOR ANY ILLNESS OR INJURY THAT THE MINOR MAY SUSTAIN DURING THE AFTER SCHOOL MARTIAL ARTS PROGRAM AND WHILE TRAVELING TO AND FROM THE SITE FOR THE AFTER SCHOOL MARTIAL ARTS PROGRAM WHETHER OR NOT THE AFTER SCHOOL MARTIAL ARTS PROGRAM ACTUALLY OCCURS.

**APPEARANCE AGREEMENT.** I UNDERSTAND THAT U.S. TAE KWON DO COLLEGE, INC. FROM TIME TO TIME PRODUCES PROMOTIONAL MATERIAL RELATING TO ITS AFTER SCHOOL PROGRAMS. I UNDERSTAND THAT AS A PARTICIPANT AND/OR A SPECTATOR AT THE AFTER SCHOOL MARTIAL ARTS PROGRAM, MINOR MAY BE INCLUDED IN VIDEOTAPES, PHOTOGRAPHS, DVDs, PODCASTS, AND VIDEOCASTS TAKEN DURING THE AFTER-SCHOOL PROGRAM. THEREFORE, WITHOUT RESERVATION OR LIMITATIONS, I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, HEREBY ASSIGN, TRANSFER AND GRANT TO U.S. TAE KWON DO COLLEGE, INC., ITS SUCCESSORS, ASSIGNEES, LICENSEES, SPONSORS, ANY TELEVISION NETWORKS, AND ALL OTHER COMMERCIAL EXHIBITORS THE EXCLUSIVE RIGHT TO PHOTOGRAPH AND/OR VIDEOTAPE MINOR AND TO UTILIZE SUCH VIDEOTAPES AND PHOTOGRAPHS AND MINOR'S NAME, FACE, LIKENESS, VOICE AND APPEARANCE AS A PART OF THE AFTER SCHOOL PROGRAM, IN ADVERTISING AND PROMOTING THE AFTER SCHOOL MARTIAL ARTS PROGRAM OR IN ADVERTISING AND PROMOTING SIMILAR FUTURE EVENTS. I FURTHER UNDERSTAND THAT NEITHER U.S. TAE KWON DO COLLEGE, INC. NOR ANY THIRD PARTY IS UNDER ANY OBLIGATION TO EXERCISE ANY OF THE FOREGOING RIGHTS, LICENSES AND PRIVILEGES. I, IN MY OWN BEHALF AND ON BEHALF OF THE MINOR, WAIVE ANY RIGHT TO INSPECT OR APPROVE ANY MATERIALS RELATED THERETO.

**AFTER SCHOOL RULES.** I FURTHER ACKNOWLEDGE AND UNDERSTAND THAT U.S. TAE KWON DO COLLEGE, INC. HAS ESTABLISHED RULES AND REGULATIONS PERTAINING TO CONDUCT, BEHAVIOR AND ACTIVITIES OF ALL AFTER SCHOOL AFTER SCHOOL MARTIAL ARTS PROGRAM PARTICIPANTS BY WHICH MINOR AND I AGREE TO ABIDE DURING THE AFTER SCHOOL PROGRAM), AND THAT MINOR AND I WILL BE RESPONSIBLE FOR HIS/HER/MY FAILURE TO ABIDE BY THOSE RULES AND REGULATIONS. MINOR AND I HAVE RECEIVED, READ AND UNDERSTAND THE AFTER SCHOOL MARTIAL ARTS PROGRAM RULES. MINOR AND I UNDERSTAND THAT VIOLATION OF THE RULES CAN RESULT IN DISMISSAL FROM AFTER SCHOOL MARTIAL ARTS PROGRAM WITH NO REFUND.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# U.S. TAE KWON DO COLLEGE AFTER SCHOOL MARTIAL ARTS PROGRAM



PLEASE READ THE BELOW POLICY IMPLEMENTED BY FAIRFAX COUNTY.

DEAR PARENTS OF USTC BEFORE/AFTER SCHOOL MARTIAL ARTS PROGRAM STUDENTS:

PLEASE NOTE THAT OUR BEFORE/AFTER SCHOOL MARTIAL ARTS PROGRAM ALONG WITH OTHER MARTIAL ARTS SCHOOLS AROUND VIRGINIA ARE EXEMPT FROM LICENSURE AS A DAY CARE CENTER UNDER CODE OF VIRGINIA 63.2-1715-2, REFERRED TO AS "COME AND GO."

"COME AND GO" IS DEFINED AS "A PROGRAM WHERE, BY WRITTEN POLICY GIVEN TO AND SIGNED BY A PARENT OR GUARDIAN, SCHOOL-AGED CHILDREN ARE FREE TO ENTER AND LEAVE THE PREMISES WITHOUT PERMISSION OR SUPERVISION, REGARDLESS OF (I) SUCH PROGRAM'S LOCATION OR THE NUMBER OF DAYS PER WEEK OF ITS OPERATION; (II) THE PROVISION OF TRANSPORTATION SERVICES, INCLUDING DROP-OFF AND PICK-UP TIMES; OR (III) THE SCHEDULING OF BREAKS FOR SNACKS, HOMEWORK, OR OTHER ACTIVITIES. A PROGRAM THAT WOULD QUALIFY FOR THIS EXEMPTION EXCEPT THAT IT ASSUMES RESPONSIBILITY FOR THE SUPERVISION, PROTECTION, AND WELL-BEING OF SEVERAL CHILDREN WITH DISABILITIES WHO ARE MAINSTREAMED SHALL NOT BE SUBJECT TO LICENSURE"

BY SIGNING THIS AGREEMENT, YOU ARE ACKNOWLEDGING AND AGREEING TO THE TERMS.

PARENT NAME: \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

CHILD NAME: \_\_\_\_\_

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