



APPLICATION FORM FOR MINOR

Child name: _____ Date of birth _____

Address: _____

Phone: _____ Cell _____ email _____

Parent/Guardian name _____

Address: _____

Emergency contact: _____

Credit card _____ Exp. date _____ CSC _____

I authorize the above named business to charge the credit card indicated in this application form. This payment authorization is for the goods/services provided by the Club. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms of my child membership and services provided.

Photographs and video waiver

I hereby grant permission to the Club and its representatives to take fencing practice and tournaments photos or videos of my child. I further grant to the Club and their representatives the right to reproduce, use, exhibit, display, broadcast and distribute and create derivative works of these photos and videos in any media now known or later developed. I acknowledge that the Club owns all rights of images and videos.

Signature _____ Date _____

Please complete this application form and submit it along with your cheque payable to the Halton Blades Fencing Club and signed waiver, release and hold harmless agreement.

Please note that refunds are not offered for missed classes. The only exception is if a student becomes unable to participate in the class due to an injury or serious family reason. In this case the class will be pro-rated from the time of the absence.