

ALL STAR BOXING CLUB MEMBERSHIP APPLICATION

_____ Date **Name:** _____ **Birth Date** _____
 _____ Membership# **Address** _____ **City** _____ **State** _____
 Zip Code _____ **Home Tele** _____ **Cell Phone** _____
 _____ Expiration **Email** _____

Payment Authorization

Billing for Monthly Dues. By signing this agreement, you have authorized the club to bill your bank account or credit card for your monthly dues or if you may elect to pay cash or check by circling the payment option below, (EFT, preauthorized check or credit card charge) for a minimum or _____ months from the start date (hereinafter referred to as "the term"). Your account will be billed on or shortly following the 15th of each month beginning _____, 20____, for the amount of \$ _____. A \$15 service charge will be applied for each month your monthly dues are returned uncollectible.

- In order to cancel the membership billing for the 15th, the club requires notification in writing by the 5th of the month in person or by certified mail (any membership can be cancelled with 30 days written notice).
- After this minimum term has been met, your membership will continue on a month to month basis
- Any term contract cannot last for a period greater than 12 months.

I have read and fully understand the cancellation Policy and billing procedure.
(Member _____ initials)

The club will bill you: VISA M/C AMEX DISCOVER CHECKING
Name as it appears on credit card or check: _____

BANK NAME: _____ ACCOUNT #: _____ EXP DATE: _____

Voided check/Charge Card Info attached Yes No. Routing #: _____

Monthly Membership:

Pro-Am Boxing \$60 per month	Men's White Collar Boxing \$50 per month	Women/kids 12 and under \$50 per month
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Payment Options

Pro-AM Boxing Training 5 days a week (circle one option)

Monthly	Quarterly	Semi Annually	Yearly
\$60	\$171	\$342	\$648

Men/Women/Kids Classes 3 days a week (circle one option)

Monthly	Quarterly	Semi Annually	Yearly
\$60	\$171	\$342	\$648

ALL STAR BOXING CLUB:

MEMBER:

_____ _____
Member Signature Date

Applicant MUST sign this release form

ALL STAR BOX CLUB – RELEASE AND HOLD HARMLESS

*I, _____, acknowledge that training for, BOXING and strength & conditioning multi-sport events are potentially hazardous activities. I further acknowledge that Boxing and multi-sport training are extreme tests of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. I HEREBY ASSUME THE RISKS OF PRARTICIPATING IN ALL CLUB FUNCTIONS. I certify that I am physically fit, have sufficiently trained for participation in these events and have not been advised otherwise by a qualified medical person. I acknowledge that my statements on this RELEASE AND HOLD HARMLESS are being accepted by ALL STAR CLUB, permitting me to participate in organized Club functions. I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns a) I AGREE to abide by the Rules adopted by USA Boxing, including the Rules of ALL STAR BOX CLUB, as they may be amended from time to time, and I WAIVE, RELEASE AND DISCHARGE from any and all claims or liabilities for death, personal injury, property damages, theft or damages of any kind, which arise out of or relate to my participation, or my traveling to and from, an organized Club function b) THE FOLLOWING PERSONS OR ENTITIES of ALL STAR BOX CLUB, Club sponsor, volunteers, and the officers, directors, employees, representatives and agents of any of the above; c) I AGREE NOT TO SUE any of the persons or entities mentioned above for any of the claims or liabilities that I have waived, released or discharged herein; and d) I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above from any claims made or liabilities assessed against them as a result of my actions during an organized Club function. **I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER (if under 18, parent of guardian must also sign below)***

I HAVE READ THIS DOCUMENT, AND I UNDERSTAND AND AGREE WITH ITS CONTENTS.

SIGNATURE _____ **DATE** _____

As the natural or legal guardian of the minor named above, I hereby bind myself, the minor and our executors, administrators, heirs, next of kin, successors and assigns to the terms of the foregoing RELEASE AND HOLD HARMLESS. I represent that I have the legal capacity and authority to act for and on behalf of the minor named above and I agree to indemnify and hold harmless the persons or entities mentioned in the foregoing RELEASE AND HOLD HARMLESS for any claims made or liabilities assessed against them as a result of any insufficiency of my legal capacity or authority to act for and on behalf of the minor in the execution of the foregoing RELEASE AND HOLD HARMLESS or in the execution of this Consent.

PARENT/GUARDIAN SIGNATURE _____

DATE _____