



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

MARTIAL ARTS

THOUSAND OAKS FAMILY YMCA



Our Y is excited about our Martial Arts Program!

Martial Arts is a great program for all levels. This class will help build strong character while having fun and creating physical activity for your child. Instruction is taught by Caprice Martin and will be progressive, all skill level is accepted. Sessions run every 4 weeks! Sign up at the Membership desk.

- Ages 5-12
- Tuesday & Thursdays 5:00pm-6:00pm (Multi-purpose Room)
- Monthly Fees: Member - \$79 Non-Member - \$99

Must register for each 4 week session. Circle the session dates you are signing up for. *May register for all 3 sessions at one time.

- ♦ 6/26-7/19
- ♦ 7/24-8/16
- ♦ 8/21-9/13

LOCATION: THOUSAND OAKS FAMILY YMCA
16103 Henderson Pass
San Antonio TX 78232
210-494-5292
Ymcasatx.org



Youth & Family General Registration Form

**FOR YOUTH DEVELOPMENT®
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Child's Name: _____ Gender: M or F DOB: ____ / ____ / ____

Address: _____ City: _____ State: _____ Zip: _____

Parent/Guardian#1: _____ Gender: M or F DOB: ____ / ____ / ____

Primary Phone: (____) _____ - _____ Email Address: _____

Parent/Guardian#2: _____ Gender: M or F DOB: ____ / ____ / ____

Primary Phone: (____) _____ - _____ Email Address: _____

Late Pick Up Agreement

We recognize emergencies happen and families may run late due to traffic or unforeseen circumstances. We will make every attempt to work with families when faced with occasional tardiness. In the event you are running late please alert your site team that they might ease any anxiety your tardiness may cause for your child. As we do accrue additional program costs during extended hours, any student enrolled who has not been picked up by the end of the program will be charged:

\$20.00 for 1 to 15 minutes late

\$1.00 per minute after the first 15 minutes

All late pick-up fees must be paid in the month they are incurred.

Any child who has not been picked up within one hour of closing, and the YMCA office has had no contact with the parents/guardians or emergency contact persons listed on the Enrollment Agreement, will be turned over to the custody of the local authorities.

Parent's Initials: _____

I will be responsible for my child's medical costs due to accident or illness. I will hold the YMCA of Greater San Antonio and its directors, officers, employees, volunteers and other agents harmless for incidents which may arise from participation in the YMCA programs and activities, realizing that there are risks in these activities. I give permission for photographs to be made of my child(ren) to be used solely for publicity and training purposes by the YMCA of Greater San Antonio. The YMCA has my permission to evaluate the impact of their programs on my children. I understand that surveys may be conducted on a routine basis and that all information collected on individual children will be confidential. Group averages will be shared with staff to improve programs, with donors to maintain funding and with parents/volunteers to provide information on how the YMCA is building strong kids, strong families and strong communities. **I understand all refund/credit requests must be made in writing and will only be considered before the first class. There will be a \$20 service fee on all refunds/credits. Any credits not utilized within 1 year of issuance will be forfeited.**

Signature of Parent/Guardian

Date

Date Of Registration	Registered Month	Amount Paid / Scholarships Discounts	Staff Initials