

## **SCORPION MMA**

Name: \_\_\_\_\_ Primary Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email: \_\_\_\_\_

I was referred by: \_\_\_\_\_

**Program(s):** \_\_\_\_\_ **Period Length:** \_\_\_\_\_ **Membership Rate:** \_\_\_\_\_

**Forms of Payment:** Members can choose from one of the following payment methods.

Please circle one of the following payment options:

1. Post Dated Cheques: Members are responsible to provide the correct number of post dated checks on the starting day of their membership.
2. Cash: This option is only available for members who choose to pay the total sum of their membership up front.

**Promise To Pay:** Member promises to pay Scorpion MMA total of payments according to the payment schedule shown above. The payments will automatically go month- to- month at your same rate after the full term of the agreement, unless the member gives notice of cancellation by email: [scorpionmmateam@gmail.com](mailto:scorpionmmateam@gmail.com) and signs a cancelation form at least 14 days prior to the next payment date.

**Vacations:** For vacation absences of 2 or more weeks, your billing will be frozen. Member must provide 1 week notice for the following arrangement to [scorpionmmateam@gmail.com](mailto:scorpionmmateam@gmail.com) . Billing will be frozen for a maximum of 1 month.

Scorpion MMA is not responsible for any injuries that may occur during Classes or Open Gyms. All injuries must be reported to the appropriate trainer prior to the start of class.

I certify that I have fully read and understand the terms of this Agreement and will comply with the contents herein.

Member Name (Please Print): \_\_\_\_\_

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_