# WELCOME TO GKR KARATE

GKR KARATE
YOJI'S (UNDER 5 YRS)

## SECTION 1 - Student Details - Ages 3 to 4 (Yoji)

| Name | Date of birth dd/mm/yyyy | M | F |
|---|---|---|---|
| 1. | / / | | |
| 2. | / / | | |
| 3. | / / | | |
| 4. | / / | | |

### MAIN CONTACT PERSON

Name: Relation to Student (Self/Father/Mother etc.):

Contact Number: Main Contact Date of Birth: / /

Emergency Contact: Emergency Contact No:

Street Address:

Postcode: State: Email:

## SECTION 2 - Membership

Existing Member (Go to Section #3) New Member Dojo: First Class Date: / /

Uniform Size: Consultant Name: Office Use: P E D

**Membership Payment:**

Cash $ Credit Card $ **(Complete details in Section 4B) OR Please contact me for card details**

## SECTION 3 - Direct Debit Training Pass Options - Ages 3 to 4 (Yoji)

Single U/5 $24.50pw 2 in family U/5 $47pw Note: this fee will increase to $_____ pw at age 5

**Direct Debit Payment:**

**I would like to pay via:** **Bank Account (Complete details in Section 4A)** **Credit Card (Complete details in Section 4B)**

Weekly Fortnightly Four Weekly Monthly First Payment Date:

**Summary of Direct Debit Conditions**

1.Direct debit agreement is subject to a 7 day cooling off period. **2.**Students are able to suspend training passes for up to 6 weeks per year for a min. of 2 weeks each time. A $5 per week fee applies to pass suspensions. **3.**A one-off $12.00 service fee will be applied to your first payment **4.**Weekly fee based on an annual rate divided by 52 weeks. **5.**Students may opt-out at any time. 28 days' notice required to discontinue payments. **6.**Full T's and C's will be sent via email from Debit Success upon processing. **7.**Where applicable, the training fee will increase to the standard rate when the student turns 5.

I have read and understood the above. Authorised by (Parent/Guardian):

## SECTION 4 - Payment Details

### 4A. Bank Account Details

Bank: Name on Account:

BSB No: Acct No:

### 4B. Credit Card Details

**PLEASE CHARGE MY CARD** **VISA** **MASTERCARD**

**Credit Card Number** **Expiry Date** / **CVV**

Name on Card: Signature: Amount: $