

Masters Fencing Club

Application Form



1. Fencer's Data

Name: _____

Age: _____ Date of birth: _____ / _____ / _____ E-mail 1: _____

E-mail 2: _____

Address: _____

Tel. Home: _____ Work: _____ Cell.: _____

We strongly recommend a health examination by a licensed Medical practitioner prior the practice of fencing. This sport puts a lot of weight and stress on legs, knees, ankles. It combines aerobic, anaerobic, isometric, and isotonic exercises. If the fencer has any health condition, please explain: _____

Signature of applicant: _____ Date: _____ / _____ / _____

Signature of parent or guardian for applicants 18 years old or younger:

_____ Date _____ / _____ / _____

2. Fees

The monthly fee is \$125 for the new fencers. It includes the classes on Fridays, Saturdays, and the club's fees for the first three months. After this, it covers the floor fees and one class per week. This amount must be paid on the first day of the month, and is paid a month in advance. Late fees can applied. If for any reason the fencer stops attending the club this amount will not be reimbursed. Family or group special fees can be arranged. Make checks Pay to the order of: **Masters Fencing Club, Inc.**

3. Policy

Correct conduct and manners are required to participate in the club. Inappropriate behavior will not be tolerated. Our goal is to create a friendly environment. Our club is open to any person, regardless gender, color, religion, etc.

WAIVER OF LIABILITY:

All the new fencers MUST Read and Sign the Following Statements (for athletes under the age of 18, a parent or guardian must sign)

Upon becoming a member of Masters Fencing Club (MFC), I agree to abide by the current rules of the MFC, USFA and Gold Coast Division. I become a member of the club at my own risk and release the MFC, USFA and their sponsors, coaches, organizers, North Miami Beach, from any liability. The undersigned certifies that the birth date of the individual is as stated on the this form .

Signature of applicant: _____ Date: _____ / _____ / _____

Signature of parent or guardian for applicants 18 years old or younger:

_____ Date _____ / _____ / _____

Contacts:

Rafael Suarez: 954 254 8574

Manuel Hiraldo: 786 271 6297

Always visit our website for latest information and schedule:

www.MastersFencingClub.com