



NIMMA's BEFORE and AFTER SCHOOL PROGRAM GUIDELINES

Dear Parents,

We look forward to getting to know your child this school year and helping nurture their growth and development. To ensure successful Before & After School Programs ("BASP") experience, please take note of the following guidelines. Should you have any questions or concerns, please do not hesitate to contact the BASP staff at NIMMA.

DROP OFF

NIMMA is on the Claremont School Bus Routes. Parental drop off no earlier than 6:30 A.M. for "Befores" and no earlier than 2:30P.M. for "Afters".

DETENTIONS:

If your child gets a detention after school, you must find alternate arrangements to transport them to NIMMA.

ABSENCES:

If your child is absent from school, or for any reason will not be attending, please call NIMMA (542-1733) to let us know. This also includes when family members or friends will be picking up your children at school for some other activity.

ALTERNATE PICK-UP AT NIMMA:

If you have arranged for someone other than you, your spouse, or other guardian to pick up your child from NIMMA, you must call us to let us know. We will only release a child to someone you have designated on the "Pick up authorization form" or someone you tell us is permitted.

KARATE CLASSES:

Students are expected to go to their karate class every afternoon they attend NIMMA. We allow time for the students who attend to also work on homework they may have.

SNACKS:

Please pack an extra snack for your child to eat when they arrive at NIMMA. They are usually hungry by that time, and need energy to get the most out of their karate class.

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HOMEWORK:

We have a room specifically for students to work on their homework. Please let us know if your child typically has homework to do, or if they are neglecting it. We will do our best to make sure they get it done here.

PICK-UP:

Pick-up is by 6:00 p.m. **Late pick-ups are charged \$5.00 every 15 minutes that parents are late.**

CAMPS:

On certain Holidays and school vacations we offer full day and full week camps. The charge for these camps is separate and additional.

SNOW DAYS:

On snow days we will offer a full day of camp for a flat rate of \$35.

I, _____, hereby acknowledge that I have read and

(Please Print)

understand the foregoing policy and I agree to abide by all its terms and conditions.

Date: _____

Parent Signature

MS:bjd/6/16



Before & After Program Enrollment Agreement

The undersigned agrees to allow (child's name) _____ to participate in NIMMA's *Before and After Program* for the duration of the school year 2016-2017. Weekly tuition of \$ 60 is due at the beginning of each week. (Check payable to NIMMA) For those school weeks in which there is an observed National Holiday, the tuition will be reduced by \$ 12 each day. No reimbursement or tuition reduction will be given for Half-Days, or Parent-Teacher Conference Days. Four weeks notice is required to leave the program, the undersigned is nonetheless responsible for the tuition during that period. Tuition that is two weeks in arrears will be cause for termination of the above named from the program. Students who are picked up more than 15 minutes after the afternoon session will incur a \$5 late fee per each 15 minute (or part thereof) period. *Note: There will be an additional \$20 fee for returned checks.*

The undersigned further agrees to the discipline policy and will support NIMMA in the effort to build respectful, self-confident, and well behaved students.

Parent/Guardian Name (print) _____
 Home phone _____ Cell Phone _____ Work phone _____
 Email (please write clearly!) _____
 Alternate contact information: _____

Street Address _____ City _____ State ____ Zip _____
 Parent/Guardian Signature _____
 Student's date of birth _____ Favorite activities _____
 School attending _____ Grade this school year _____

Release and waiver of Liability

In consideration of services to be rendered to the student who is participating in the NIMMA *Before & After Program*, the undersigned hereby releases and forever discharges the School (NIMMA), its owner, its heirs, successors, instructors, administrators, and assigns from any and all legal actions, liability, claims and demands upon or by reason of any damage, loss, injury, or suffering known or unknown which may be sustained by (*student's name*) _____ in connection with and in course of participating in this program and receiving Martial Arts training on these premises, from the instructor, staff, official, or employees of NIMMA or any fellow students. The student and the parent/guardian undersigned hereby waives all his/her rights to the claims, actions, cause of action, demand or suit for loss, injury, damage, or suffering sustained as a result of anything other than gross negligence on the part of this school. The undersigned acknowledges and assumes all the risks inherent and incident to this type of sport, art, discipline, or activity as a condition for admission to this school/program.

Signed _____ Date _____

NATIONAL INSTITUTE OF MODERN MARTIAL ARTS BUYER'S RIGHTS

According to NH law, RSA 358-S, we give to you the following notice of buyer's rights.

NOTICE TO BUYER: DO NOT SIGN THIS CONTRACT UNTIL YOU HAVE READ ALL OF IT. ALSO, DO NOT SIGN THIS CONTRACT IF IT CONTAINS ANY BLANK SPACES.

STATE LAW REQUIRES THAT THIS MARTIAL ARTS SCHOOL REGISTER WITH THE BUREAU OF CONSUMER PROTECTION AND ANTITRUST OF THE DEPARTMENT OF JUSTICE AND MAY REQUIRE THAT THIS MARTIAL ARTS SCHOOL POST A BOND TO PROTECT CUSTOMERS WHO PAY IN ADVANCE FOR MEMBERSHIP OR SERVICES IN THE EVENT THIS MARTIAL ARTS SCHOOL CLOSES. YOU SHOULD ASK TO SEE EVIDENCE THAT THIS MARTIAL ARTS SCHOOL HAS EITHER POSTED A BOND IN COMPLIANCE WITH THE LAW OR HAS BEEN EXEMPTED FROM THIS REQUIREMENT BY THE ATTORNEY GENERAL BEFORE YOU SIGN THIS CONTRACT. IF THIS MARTIAL ARTS SCHOOL HAS NOT POSTED SUCH A BOND, AND YOU PAY THIS MARTIAL ARTS SCHOOL FOR MORE THAN ONE MONTH'S MEMBERSHIP OR SERVICES IN ADVANCE, THEN YOU ARE PAYING FOR FUTURE SERVICES, AND YOU MAY BE RISKING THE LOSS OF YOUR MONEY IN THE EVENT THAT THE MARTIAL ARTS SCHOOL CEASES TO CONDUCT BUSINESS. (The National Institute of Modern Martial Arts only accepts membership fees on a week to week or month to month basis and is therefore exempt from posting the above mentioned bond.)

YOU MAY CANCEL THIS TRANSACTION IN WRITING ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION.

NIMMA's BEFORE and AFTER SCHOOL PROGRAM

DISCIPLINE POLICY FORM

To all Parents and Students,

Please read this behavior policy and acknowledge your agreement with its terms by signing it and returning it with your registration.

In an effort to bring your child(ren) and the other students a safe and fun experience, it is necessary that all students exhibit proper behavior, self-discipline and self-control. Correcting unsatisfactory behavior is time consuming and detracts from providing quality, safe, educational and fun activities for the rest of the students.

If we are unable to control a situation we will contact the parents first by telephone at or near the time of the disturbance, so that the parent may reinforce (by phone) the requirement that all students enrolled at NIMMA's Before and After School Program or Camp behave satisfactorily and follow instructions fully and promptly.

Students that cannot be controlled by verbal commands or that are a constant disciplinary problem will be suspended without a refund after appropriate warnings to their parents.

Discipline Policy: When NIMMA's staff experience repeated inappropriate behavior from any enrolled child, that child will be given ample verbal warning of the impropriety of their actions and instructions to correct it. After being set out of the activity at hand, if the student's behavior is not corrected promptly we will contact the parents by phone for assistance in changing the child's actions. Upon a second disciplinary action requiring a phone call to a parent, we will require parents to make arrangements immediately (in one hour or less) to pick-up their child for the rest of the day.

I, _____, hereby acknowledge that I have read and understand
(Please Print)
the foregoing policy and I agree to abide by all of its terms and conditions.

Date

Parent's Signature

Phone Numbers:

Home: _____

Mother's Work: _____

Father's Work _____

MS:bjd /6/16

MEDICAL INFORMATION FORM

Child's Name _____ DOB _____

Address: _____

Email: _____

Name of Parent's or Legal Guardian(s) _____

Emergency #'s: Home _____ Mother's Work _____ Father's Work _____

Alternative Contact In Case of Emergency: Name: _____

Relationship: _____ Phone: _____

Name of Child's Physician: _____

Medical Insurance for Child _____

CONSENT AND RELEASE FORM

**** Must be initialed and notarized****

Initial here

_____ I understand that NIMMA is a martial arts school and not a daycare as such; NIMMA's stock-in-trade is not supervision and care. The intent of NIMMA programs is to teach martial arts physical and philosophical character building skills. I understand that NIMMA is a martial arts school and is offering the Before and After programs as a service to our community.

_____ I give my consent to NIMMA, its instructors, employees or any emergency personnel to administer necessary treatment to my child in the event of an emergency and to transport him or her by ambulance if the situation warrants.

_____ I hereby give my consent to NIMMA or its authorized agents to walk my child to and from the NIMMA center and Barnes Park, located across the street from NIMMA.

_____ I understand that karate, and other martial arts are sports involving physical contact and exercise. I am aware that my child is engaging in physical exercise and self defense instruction. I understand it is always advisable to contact a physician before entering any program of physical fitness. I am aware that the students will be voluntarily participating in these activities. I hereby waive any claim or right to sue The National Institute of Modern Martial Arts, its owner, its employees, students, instructors, volunteers and management for any or all injuries that may occur on or off the premises, through negligence or not, while participating or practicing in karate or any other martial arts event, camp or fitness program.

_____ I understand that while in karate camp we will be engaging in the following activities: Park events, karate, games, and many more activities and sports. Being aware of the risks and hazards inherent to the use of certain equipment or the facilities in camp activities, I hereby assume all risk of loss, damage and injury including death that may be sustained by my child.

_____ In signing this consent and release form, I hereby acknowledge and represent that I have read the foregoing, understand its terms and sign it voluntarily. I ALSO ACKNOWLEDGE THAT MY CHILD IS IN EXCELLENT PHYSICAL HEALTH AND IS ABLE TO ENDURE STRENUOUS RECREATIONAL ACTIVITIES AND PLAY, INCLUDING THE ABOVE NAMED ACTIVITIES AND OTHERS NOT MENTIONED OR STATED.

_____ **Date**

_____ **Parent or Guardian's Signature**

STATE OF New Hampshire
Sullivan County

_____, 201_

Personally appeared before me the above-named _____ and made oath that the foregoing statements are true and correct to the best of his/her personal knowledge and that based on the truth of the foregoing statements he/she believes them to be true.

Before me,

Notary Public

My Commission Expires

PICK UP AUTHORIZATION

I give the below named people permission to pick up my child

1. _____

2. _____

3. _____

My child may *not* go with, under any circumstances:

Signed: _____ Dated: _____