



11 SOUTH MAIN STREET · NATICK, MASSACHUSETTS 01760
508.655.6480 · ZETA FENCING.COM

BEGINNER & INTERMEDIATE CLASSES – REGISTRATION 2020-2021

First Name	Last Name
Street Address	Year of Birth
City	State/Zip
Phone (primary emergency contact)	Phone (alternative emergency contact)
Parent's Name 1	Parent's Name 2
Parent's email (PLEASE PRINT CLEARLY, required for class-related information)	

Please list any medical conditions that we should be aware of (allergies, disabilities, etc.).

CLASS

BEGINNER CLASS

YOUTH 10 (ages 8-10) **MONDAY** 5:00 – 6:30PM **SATURDAY** 11:00 – 12:30PM

YOUTH 12 (ages 11-13) **SATURDAY** 1 – 2:30PM

INTERMEDIATE CLASS (Coach's consent required)

YOUTH 10 **THURSDAY** 5:00 – 6:30PM **YOUTH 12** **TUESDAY** 5 – 6:30PM

ZOOM CLASS ONLY (\$150/SESSION) **FRIDAY** 4 – 5PM

PAYMENT: \$280 PER 7-WEEK SESSION (FAMILY DISCOUNTS AVAILABLE FOR MULTIPLE SIBLINGS)

CHOOSE ONE: \$250 FULLY REFUNDABLE DEPOSIT FOR COMPLETE FENCING EQUIPMENT LOAN (CHECK OR CASH ONLY).
 \$150 FULLY REFUNDABLE DEPOSIT FOR PARTIAL FENCING EQUIPMENT LOAN (CHECK OR CASH ONLY).

SESSION

- SESSION 1: Tuesday, September 8 – Monday, October 26, 2020
- SESSION 2: Tuesday, October 27 – Monday, December 21, 2020 (no classes during Thanksgiving break: *Monday, November 24 – Sunday, November 30*)
- SESSION 3: Monday, January 4 – Saturday, February 27, 2021 (no classes during school break: *Monday, February 15 – Sunday, February 21*)
- SESSION 4: Monday, March 1 – Saturday, April 17, 2021 (no classes during school break: *Monday, April 19 – Sunday, April 25*)
- SESSION 5: Monday, April 26 – Monday, June 14, 2021 (no classes on *Memorial Day, May 31*)

TYPE OF PAYMENT

- CHECK or CASH** – payment attached, date on check: _____ check number: _____
- ONLINE WEBSITE PAYMENT** via PayPal – date of payment: _____

WAIVER OF LIABILITY

Initial	I UNDERSTAND THAT PARTICIPATION IN ANY SPORT CARRIES A RISK OF SERIOUS INJURY. I KNOWINGLY ACCEPT AND ASSUME THIS RISK AND RELEASE ZETA FENCING, ITS SPONSORS, INSTRUCTORS AND OFFICERS OF ANY LIABILITY.
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CONSENT FOR MEDICAL TREATMENT

Initial	I GIVE MY CONSENT TO THE STAFF AND COACHES OF THE ZETA FENCING TO OBTAIN MEDICAL CARE FROM ANY LICENSED PHYSICIAN, HOSPITAL OR CLINIC FOR ANY INJURY OR ILLNESS THAT MAY ARISE DURING ACTIVITIES ASSOCIATED WITH ZETA FENCING.
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ZETA FENCING COVID-19 COMPLIANCE

Initial	BY USING OUR FACILITIES, YOU AGREE TO ABIDE BY ALL POSTED COVID-19 GUIDELINES AND TO SUBMIT A CURRENT AND COMPLETE COVID-19 QUESTIONNAIRE BEFORE ATTENDING THE FIRST CLASS.
I HAVE READ THE ZETA FENCING COVID-19 COMPLIANCE POLICY AND AGREE TO ITS TERMS.	

COMMITMENT POLICY & PRIVACY STATEMENT

- I AGREE TO ENROLL FOR THE FULL 7-WEEK SESSION, TO PAY THE FULL TUITION OF EITHER \$150 OR \$ 280, AND TO REGISTER WITH USA FENCING.
- I give permission for my/my child's photo to be used for promotional purposes for Zeta Fencing. I do not give permission.

Signature	Date
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A PARENT OR GUARDIAN MUST SIGN FOR STUDENTS UNDER THE AGE OF 18.

APPLICATIONS ARE ACCEPTED IN THE ORDER IN WHICH THEY ARE RECEIVED. EACH CLASS IS LIMITED TO 10 FENCERS.
FULL PAYMENT MUST BE RECEIVED WITH APPLICATION TO HOLD YOUR SPACE.