



ZETA FENCING STUDIO

11 SOUTH MAIN STREET
NATICK, MASS 01760

TEL/FAX 508.655.6480
WWW.ZETAFENCING.COM

MEMBERSHIP FORM

PLEASE PRINT CLEARLY

FIRST NAME	LAST NAME
ADDRESS	
CITY	STATE / ZIP
PHONE (HOME)	PHONE (WORK / CELL)
FATHER'S NAME	MOTHER'S NAME
EMAIL	DOB
WEAPON	USFA CLUB REPRESENTATION

INDIVIDUAL JUNIORS \$275.00

FAMILY \$550.00

FLOOR FEE \$20.00

WAIVER OF LIABILITY

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

SIGNATURE

DATE

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

CODE OF CONDUCT

IN ORDER TO ENSURE A SAFE, PRODUCTIVE AND SPORTSMANLIKE ATMOSPHERE FOR ALL OUR MEMBERS, EVERYONE WHO USES OUR FACILITY MUST ADHERE TO OUR CODE OF CONDUCT, AND IS EXPECTED TO HOLD ONE ANOTHER TO THESE STANDARDS. BY USING OUR FACILITIES, YOU AGREE TO ABIDE BY THIS CODE AND BE SUBJECT TO ITS DISCIPLINARY PROVISIONS.

I HAVE READ THE ZETA FENCING STUDIO CODE OF CONDUCT AND AGREE TO ITS TERMS.

SIGNATURE

DATE

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

PAYMENT RECORD / OFFICE USE ONLY

THE MEMBERSHIP TERM IS SEPTEMBER 1 THROUGH SEPTEMBER 1 OF THE FOLLOWING YEAR. THIS FORM MUST BE COMPLETED BY ALL NEW AND RETURNING MEMBERS ON AN ANNUAL BASIS. IN ADDITION, KINDLY SUBMIT THE APPROPRIATE CLASS REGISTRATION FORM.

AMOUNT

CHECK #

DATE