

After School Enrichment Program Information

The Ch'i Life After School Enrichment Program is designed to support the student in learning Kung Fu while building self confidence, concentration and respect. Ch'i Life vans pick up students at school and bring them to Ch'i Life Studio. Students will attend the kung fu classes one, two or three times a week. When not in a kung fu class students will have time to do homework, study, have free time, or participate in the craft or exploration of the day.

The Ch'i Life After School Enrichment Program ends at 6:30 PM.

Snacks

Children get hungry after school, so students should bring their own snacks. We ask that you avoid packing snacks with nuts in them because it is a common allergy.

The studio does have a limited selection of drinks for sale.

Absences & Late Pick Up

If your child is going to be absent from the After School Program or you will be late in picking them up please let us know. Call the studio: (425)746-3838

Tuition Structure for School Year

School holidays are not included in the tuition. They will be charged separately. If there is enough interest the after school program may offer all day care on those days.

Tuition is billed monthly.

Frequency	Tuition	
5 days a week	\$100 / week	includes 3 Kung Fu classes
4 days a week	\$90 / week	includes 2 Kung Fu classes
3 days a week	\$80 / week	includes 1 Kung Fu classes

Wed + \$10 extra / half-day = \$15 extra

For unlimited Kung Fu classes pay an additional \$75 / month

After School Enrichment Program Calendar

Ch'i Life Studio After School Enrichment Program observes the same holidays as the school district; there is no after school pickup on those days.

Holidays

Sept. 1	First day of school
Sept. 7	No school – Labor Day
Oct. 1-2, 4	Half-Day Elementary Conferences
Nov. 11	No school – Veterans Day Observed
Nov. 26-27	No school – Thanksgiving Vacation
Dec. 21-31	No school – Winter Break
Jan. 1	No school – Winter Break
Jan. 18	No school – Martin Luther King Jr.
Feb. 15-19	No school – Mid-Winter Break
April 4-8	No school – Spring Break
May 30	No school – Memorial Day
June 20	Last Day of School

After School Enrichment Program Application

School

Name _____

Grade _____ Days _____

Days Attending **All** **Mon** **Tues** **Wed** **Thurs** **Fri**

Name _____

Parent's Name _____

Address _____

Home Phone _____

Cell Phone _____

Cell Phone _____

Emergency Contact _____

Student

Credit Card Authorization

The Buyer requests the privilege of paying payments by credit card and hereby requests Ch'i Life Studio to draw items from the following account, or any subsequent account the buyer provides either orally, electronically, or in writing.

Visa or MasterCard
Account Number _____

Exp. Date _____

Authorized Signature _____

Date _____

Liability Waiver & Transportation Release

Required for participation in After School Program, Summer Camps and Day Camps

Transportation Release

While attending Ch'i Life Studio parents may request student transportation from their school to Ch'i Life Studio in Ch'i Life vans. They may be transported in private instructor vehicles.

Yes, my child _____ is allowed to be transported by Ch'i Life instructors.
Print Child's Full Name

Parent's Name (Print)

Parent Signature

Date

Liability Waiver

I, the undersigned, assume full responsibility for any and all damages, injuries, and losses that I may sustain or incur, of any, while attending or participating at Ch'i Life Studio, and I hereby waive all claims against Ch'i Life Studio, individually or otherwise, of any and all damages, injuries, or losses that I may sustain.

My Failure to attend the school and partake of its services does not relieve me of any liability for payment at Ch'i Life Studio.

Signature of parent / guardian if student is under 18 years of age

Signature of Student

Date

Emergency Contact Information

Student Name _____ Birthdate _____

School _____

Days Attending **All** **Mon** **Tues** **Wed** **Thurs** **Fri**

Home Address _____

Home Phone _____

Email _____

Mother/Guardian

Name _____

Cell # _____

Work # _____

Father/Guardian

Name _____

Cell # _____

Work # _____

Doctor

Name _____

Address _____

Phone _____

Emergency Contact

In case a parent can't be reached

Name _____

Phone _____

List any medical conditions we should be aware of including food allergies:

List any procedures to handle the medical condition (use back if needed):

Ch'i Life Studio - Martial Arts

Medical Release

Student's Name

Year

Consent to Treat

In the case of an emergency, Ch'i Life Studio will call an ambulance, the parent and the student's doctor.

In the case of an emergency, Ch'i Life Studio has the right to allow emergency treatment of the student.

Print Name

Signature

Date