



CATA MARTIAL ARTS

AFTER SCHOOL PROGRAM 2020-2021

LIMITED SPACE

We hope you and your family are well and safe. These extraordinary times have moved us all to a new normal and we know your child’s education will look different this year. Cata Martial Arts After School Program is a great way for students to engage with other children in a safe, healthy, and stimulating environment. Our After School Program offers homework assistance by our professional instructors and teachers and is packed with activities your kids will love!

After School Program	Monthly Tuition	Registration Fee
Registration Fee (one-time fee)		\$75.00
Students in grades K - 8th	\$275.00	

What we are doing to prioritize the health and safety of your child at Cata

- **Group Size:** Group sizes will be limited according to the CDC and Broward County Guidelines. Each group will have a designated room. Upon arrival, Students will place their belongings in their designated area. Groups will remain together throughout the day and separated from other groups and intermingling between groups will be restricted.
- **Daily Screening:** All students will be temperature checked and parents will be asked a set of questions about their recent health each day.
- **Masks/Face Coverings:** Staff and students are required to wear facial covering throughout the day.
- **Floor markings and signage:** Safe distances will be marked to help keep students appropriately spaced. Reminders for handwashing and social distancing, and safe sneezing will be posted throughout the facility.
- **Hygiene:** Scheduled handwashing breaks will be built into each group’s schedule. In addition to that, more hand sanitizer stations throughout the building for use.
- **Activities:** Activities will be modified to limit physical contact. Equipment will be cleaned between uses and/or sufficient supplies will be provided for all students to enjoy. We intend to keep Distance Learning a fun learning environment.
- **Cleaning:** Staff will be regularly sanitizing high touch surfaces such as door handles, water fountains, etc. multiple times through the day and disinfecting every night after closing.
- Any child complaining of illness or showing symptoms will be removed from their group immediately and be placed in a designated area and the guardian will be called to pick up the child. As recommended by the CDC, if your child has a fever, they cannot return until they are 72 hours fever free without the aid of medicine.



CATA MARTIAL ARTS

STUDENT INFORMATION

STUDENT NAME: _____ D.O.B.: _____ SEX: _____

ADDRESS: _____ CITY: _____ ZIP: _____

ALLERGIES: _____ MEDICATIONS: _____

PHYSICAL LIMITATIONS: _____

BEHAVIOR ISSUES: _____

SCHOOL: _____ GRADE: _____ DISMISSAL: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PARENT/GUARDIAN'S NAME: _____

MOBILE NUMBER: _____ WORK NUMBER: _____

EMAIL: _____

PARENT/GUARDIAN'S NAME: _____

MOBILE NUMBER: _____ WORK NUMBER: _____

EMAIL: _____

EMERGENCY CONTACT INFORMATION

NAME: _____ MOBILE NUMBER: _____

NAME: _____ MOBILE NUMBER: _____

Persons Authorized to Pick Up other than parent/legal guardian (Must present ID)

NAME: _____ MOBILE NUMBER: _____

NAME: _____ MOBILE NUMBER: _____

NAME: _____ MOBILE NUMBER: _____

PARENT/LEGAL GUARDIAN SIGNATURE _____ DATE: _____

Cata Martial Arts
COVID-19 Liability Release Waiver

In consideration of my/my child's participation in Limitless Martial Arts & Fitness, the undersigned
member, parent, or legal guardian acknowledges and agrees to the following:

- I am aware of the risk my/my child's physical appearance at Limitless Martial Arts & Fitness and participation in the program may cause injury or illness such as, but not limited to Influenza, MRSA, or COVID-19 that may lead to paralysis or death. **INITIAL**_____
- I have not, nor any member(s) of my household, experienced symptoms of fever, fatigue, difficulty in breathing, dry cough or exhibiting any other symptoms relating to COVID-19 or any communicable disease within the last 14 days. **INITIAL**_____
- I have not, nor any member(s) of my household, traveled by sea or by air, internationally within the past 30 days. **INITIAL**_____
- I did not, nor any member of my household, visit any area within the United States that was reported to be highly affected by COVID-19, in the last 30 days. **INITIAL**_____
- I have not been, nor any member(s) of my household, diagnosed to be infected of COVID-19 virus within the last 30 days. **INITIAL**_____

Following the pronouncements above I hereby declare the following:

- I am fully and personally responsible for myself and/or my child's own safety and actions while and during participation in the program and I recognize that I or member(s) of my household, may be at risk of contracting COVID-19. **INITIAL**_____
- With full knowledge of the risks involved, I hereby release, waive, discharge Limitless Martial Arts & Fitness, its board, officers, independent contractors, affiliates, employees, representatives, successors, and assigns from any and all liabilities, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, or death, that may be sustained by me related to COVID-19 while participating in any activity while in, on, or around the premises or while using the facilities that may lead to unintentional exposure or harm due to COVID-19. **INITIAL**_____
- I agree to indemnify, defend, and hold harmless Limitless Martial Arts & Fitness from and against any and all costs, expenses, damages, lawsuits, and/or liabilities or claims arising whether directly or indirectly from or related to any and all claims made by or against any of the released party due to injury, loss, or death from or related to COVID-19. **INITIAL**_____

By signing below I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I am at least eighteen (18) years old and fully competent to give my consent; That I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

Name of Member or Staff: _____

Member/Parent/Guardian/Staff Signature: _____

Date: _____



Cata Martial Arts After School Program

Transportation Permission Slip

I hereby grant Cata Martial Arts permission to transport my child(ren) from the school premises to Cata Martial Arts located at 13900 Griffin Rd, Southwest Ranches, FL 33330. This transportation includes Cata Martial Arts buses and private vehicles throughout the duration of the program.

As parent/legal guardian of _____, I grant
(Print Child's Name)

permission for him/her to be transported from school to Cata Martial Arts.

_____ I give my child permission to ride with the team on a private bus, or comparable transportation, under the supervision of administrators, faculty, or staff.

_____ I give my child permission to ride on public transportation under the supervision of administrators, faculty, or staff.

_____ I give my child permission to ride in a vehicle driven by administrators, faculty, or staff.

Emergency Contact: _____ Phone: _____
(please print)

Emergency Contact: _____ Phone: _____
(please print)

***Please attach a copy of your insurance card front and back.**

Signature of Parent/Legal Guardian

Date

Best Phone # _____



CATA MARTIAL ARTS AFTER SCHOOL PROGRAM 2020-2021

REFUND/CANCELLATION POLICY: We enroll students in the program in accordance with the CDC guidelines. For this reason, we DO NOT pro-rate, refund, transfer, or credit any tuition/fees paid.

VIDEO/PHOTO CONSENT WAIVER & RELEASE: Cata Martial Arts (CMA) from time to time produces promotional material relating to its programs that may require taking pictures for public media (such as internet web design, videos, magazines, newspapers, social media, TV & marketing publications) for advertising and promoting the CMA programs and similar future events. Please indicate your consent for your minor child.

_____ I hereby give consent

_____ I do not give consent

PARENTAL PICK UP RIGHTS: The child shall be authorized to be picked up by either parent/guardian, unless a death certificate on such parent or a certified copy of a court order awarding exclusive custody to the parent registering such child is produced. I have read and understand the custody rights in the absence of a death certificate on one of the child's natural parents or a Court Order awarding custody to one of the child's natural parents.

Note: In compliance with the American Disabilities Act (ADA), Public Law #101-336, Section 202, CMA requires that all participants in the program must contact us **before** the program begins to allow time to evaluate whether and to what extent reasonable accommodations can be made for those needs. Please check A or B:

_____ A. This does not apply to our situation.

_____ B. This matter applies to our situation; I will provide specific information as stated above.

WAIVER & RELEASE OF ALL CLAIMS: Please be aware in registering your child/ward for participation in this program that you will be waiving and releasing all claims for injuries you or your minor child/ward might sustain arising out of the program. As a parent/guardian of a participant in the program, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries (including death), damages or loss which my minor child/ward or I may sustain as a result of participation in any and all activities connected with such program. I agree to waive and relinquish all claims my minor/ward or I may have, as a result of participating in the program against Cata Martial Arts (CMA) and its members, management, agents, owners and employees. I hereby release and discharge CMA and its members, management, agents, owners and employees from any and all claims resulting from injuries (including death), damages and losses sustained by my minor child/ward or myself arising out of, connected with, or in any way associated with negligent acts or omissions of myself or my minor child/ward. In the event of an emergency, I authorize Cata Martial Arts' Directors to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my minor child's /ward's immediate care, and agree that I will be responsible for payment of any and all medical services rendered, including transportation charges.

I have read and fully understand the above Program Details, Refund Policy, Video/Photo Consent Waiver & Release, Parental Pick up Rights, Note, and Waiver & Release of All Claims.

Child(ren) Name(s): _____

Parent/Guardian Signature: _____ Date: _____



Recurring Payment Authorization Form

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to the credit card or checking account. You will be charged the amount of your corresponding rate on the first of each month your child(ren) are enrolled in the program. A receipt for each payment will be emailed to you and the charge will appear on your Credit Card statement as an "ACH Debit." You agree that no prior notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 15 days prior to the payment being collected. **PLEASE PRINT ALL FIELDS NEATLY.**

Please complete the information below:

I, _____, authorize and direct Cata Martial Arts ("CMA") or its designated credit/debit card transaction agent to charge my credit card/bank account \$ _____ every 1st of the month until CMA has received written notice of termination of this authorization.

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Checking Info

Checking

Name on Account _____

Bank Name _____

Bank Routing # _____

Account Number _____



Credit Card info (Optional)

Visa

MasterCard

Amex

Discover

Cardholder Name _____

Account Number _____

Exp. Date _____

NOTE: FOR CREDIT CARD TRANSACTIONS A 4% CONVENIENCE FEE WILL BE ADDED.

SIGNATURE _____

DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Cata Martial Arts in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that Cata Martial Arts may at its discretion attempt to process the charge again within 2 days, and agree to an additional \$35.00 charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form. I hereby indemnify CMA and its owners, managers, officers, employees and agents from and against any claims, suits, damages, and expenses (including but not limited to reasonable attorneys' fees and costs) incurred by or asserted against CMA arising out of or relating to my failure to provide a minimum of 15 day notice of termination of this Authorization or the inaccuracy of any information provided by me on the Authorization.

Parent Handbook
2020-2021





General Information

AFTER SCHOOL PROGRAM!!!

Dear Parents and Students,

Thank you for choosing Cata Martial Arts After School Program 2020-2021. We are extremely excited about the dynamic programs we have to offer, and we feel you will be as well. Our Program not only offers student a safe learning environment, it is also a fun, exciting, and challenging learning environment.

This handbook contains important information about our policies and will answer many of your questions. However, should any additional questions arise, please feel free to contact us at (954) 769-1899 or via email at j.garcia@catamartialarts.com. We believe ongoing communication with the parents is a key component to the success of this program and the growth of your child. Thank you again for the time and the opportunity to satisfy your child's School needs.

Best regards,

Jane Garcia
Senior Program Director
13900 Griffin Road
Southwest Ranches, FL 33330



Parent Handbook Acknowledgement

I have read the following parent handbook and I understand that I must follow all aspects of the manual.

Student's Name(s): _____

<u>Topic</u>	<u>Initial</u>	<u>Topic</u>	<u>Initial</u>
Program Guidelines	_____	Hours of Operation	_____
Holidays	_____	Registration Fee	_____
Forms and Paperwork	_____	Tuition Fee	_____
Tax Notice	_____	Late Pick-up Fees	_____
Returned Checks	_____	Arrival & Departure	_____
Clothing & Personals	_____	Medication	_____
Illness	_____	Nut Free	_____
Emergency Drills	_____	Injuries	_____
CMA Not a Day Care	_____	Media Release	_____

PARENT/GUARDIAN SIGNATURE _____

DATE _____



Cata After School

Program Guidelines

1. **Parents must call us before 12:00 PM if student is to be absent from school.** *If notice of absence is not called in and we must locate the child at pick-up time, there will be a \$10.00 fee without exception.* Please call Cata Martial Arts directly at (954) 769-1899 and leave a if there is no answer. Initial: _____
2. **Students are to be picked up no later than 6:00 PM.** Students picked up late will be charged is as follows: *First 15 minutes late-\$15.00 late fee, Each additional 15 minutes late-\$15.00.* Initial: _____
3. **Program fees, tuition, and deposits are non-refundable, non-transferable, nor credited and are to be paid in full prior to, or on the due date.** *Any payment made after the 1st school day of the week directly following due date will be assessed a \$15.00 late fee without exception.* Initial: _____
4. Snacks and beverages are not included but they may be purchased at our concession stand. Initial: _____
5. Please be advised that we will follow the Broward County School Calendar. On days where Broward Schools are closed, we will be closed. Day Camps will be available when 15 or more students register two weeks prior to the day off. Initial: _____
6. Absences or school cancelations will not be refunded or credited. Initial: _____
7. It is imperative that Cata Martial Arts be made aware of dietary or health restrictions in writing. Cata Martial Arts will not be held responsible for any situation that arises from failure to do so. Initial: _____
8. It is the parent/legal guardian's responsibility to notify Cata Martial Arts in writing of any changes in emergency contacts. Initial: _____
9. Only persons listed as authorized will be permitted to pick up your child. Anyone not listed will not be able to leave the premises with the child. Initial: _____
10. Only parents/legal guardians may notify of changes in pick-up arrangements. Having your child tell us at pick up time is not considered proper notification. Initial: _____
11. There will be **NO** late or detention pick-up. Initial: _____
12. The After School Program provides homework time, we are not responsible for your child's academic performance in school. Initial: _____
13. Students are required to bring the necessary school supplies daily to complete their homework. We are NOT responsible for such items. Initial: _____
14. All student's backpacks/bookbags must be of a reasonable size (no rolling backpacks). Initial: _____
15. Students must be signed out by the authorized adult daily. Initial: _____
16. Please note that Cata Martial Arts follows all Broward County School Wellness Guidelines covering issues with Ringworm, Lice, Pink Eye, etc. Meaning we must be informed of any highly contagious infections. Initial: _____

I, _____, AS PARENT OR LEGAL GUARDIAN OF _____, A MINOR, UNDERSTAND ALL OF THE CATA MARTIAL ARTS AFTER SCHOOL PROGRAM GUIDELINES.

SIGNATURE: _____ DATE: _____



PARENT'S COPY

Hours of Operation

7:30AM to 6:00PM Monday - Friday

Holidays

Labor Day - **CLOSED**
Veteran's Day – **CLOSED**
Thanksgiving Day & Black Friday - **CLOSED**
Christmas Eve & Day – **CLOSED**
New Year's Eve & Day - **CLOSED**
Memorial Day - **CLOSED**
Independence Day - **CLOSED**
Holidays Observed by Broward Schools - **CLOSED**

Tax Statements

It is your responsibility to keep all financial records. Our tax will be provided upon written request. With Your records and our tax ID #, you will be able to file your deductions properly.

Forms and Paperwork

Cata Martial Arts must have all necessary forms completed, fees paid and on file, before the student will be admitted. This will ensure that there are no misunderstandings, and that we have all necessary information to ensure your child's safety. Please keep all information up to date and notify us of any changes of address or phone numbers at home and work in writing as soon as they occur.

Registration and Tuition Fees

All registration and first month's tuition fees are due at the time of enrollment. The registration fee secures your monthly reservation during the school year. We cannot hold your position without paperwork and registration. WE ARE NOT A DAY CARE CENTER; we are a Professional Black Belt Leadership Academy that provides professional development to children and families.

Note: Parents that are sharing the cost of After school, we will not be accepting split payments for your child(ren).

Monthly tuition applies (per child) regardless if there is a holiday, teacher planning day, day off, or any other exception. Tuition will be charged regardless of the number of school days in that month.

REGISTRATION/TUITION FEES ARE NON-REFUNDABLE

Cata Martial Arts After School Program operates on a budget, just like every other business. We count on receiving payments on-time to ensure we satisfy our obligations and provide the quality instruction and service that our clients are accustomed to. For that reason, we have established a policy concerning payment and tuition fees.

The fee for the Program is for enrollment, whether your child comes zero or all five days during the month, the fee must be paid. Should you wish to cancel your child's enrollment, a two-week written notice is required. Should this notice not be given, you will be responsible for the tuition. Please notify us in the form of a written email only. We staff according to the total amount of students enrolled; for this reason, we DO NOT pro-rate, refund, transfer, or credit any tuition paid.



Camps and Day Camps

When Broward County Schools are closed, we will provide Day Camps when 15 or more students register. Students must be dropped off at our facility between 8:00am – 8:45am on field trip days and picked up no later than 6:00pm daily. Please notify us 2 weeks in advance if your child is participating in any of our camps.

Late Pick-Up Fees

It is necessary for children to be picked up on time. Parents who pick up their children late will be charged a late fee of \$15 per every 15 minutes according to our clock. **Payment will be due at the time of pick-up.**

Returned Checks

There will be a \$35 charge for all returned checks. Returned checks must be paid along with NSF fees within 7 days of the insufficient draft. If payment is not received within 7 days, your child's spot will be forfeited and you will be responsible for any additional weeks reserved.

Clothing and Personal Belongings

Each student will be solely responsible for his or her personal belongings. Girls should not wear skirts to camp. Please come with running shoes, no open toed shoes or sandals allowed. Students should bring in a spare change of clothes (marked with their name) daily in case of emergency such as drink spills, etc.

Students should keep personal items at home. Should a student bring personal items, Cata Martial Arts is **not responsible for these items**. In addition, all items should be personally marked with your child's name.

Cata Martial Arts has a temporary Lost & Found. This is the best place to look for lost items. Please label ALL clothing, backpacks. This enables lost items to be returned to their rightful owner. Should you need to go through the lost and found, please take the time to put the items back in the bag, bin, or box neatly.

Departure

We will not allow your child to walk to your car at the end of the day; they must be signed out and escorted by staff. Please notify the other adults on your pick-up list of our rules. This is for your child's safety and this rule is not negotiable. Should there be extenuating circumstances please call us and we will try to accommodate you. Cata Martial Arts is not responsible for custody arrangements. If there is a court order that for any reason affects our interaction with your child(ren), please bring us a copy of the court order, and we will put it in your child(ren's) folder and will follow it to the letter. Parents, we only allow adults 18 and over to pick up your child.

Illness

Your child's health is of great importance. If your child becomes ill while at CMA, you will be notified to pick them up. This needs to be done within **one hour** from time of notification. Please make sure you provide us with your most updated contact information. **No child may attend Cata Martial Arts with a fever, any open or draining wounds, or draining ears, lice, pink eye, ringworm, etc.** If any rash is present, you must speak with one of the senior staff members, a doctor's note may be required before we allow them to attend. We frown upon "sneaking" a sick child into camp.



PARENT'S COPY

Medication

WE DO NOT ADMINISTER MEDICATION. A parent or qualified professional must administer the medication prior to or after the camp.

Emergency Drills

Emergency drills are held periodically to teach your child evacuation procedures. We have exit plans located in the building to help the children remember the safest exit route in case of an emergency.

Food

Parents, please pack a balanced and nutritional lunch and 2 snacks, please do not give children Sweets or Soda. Children fare better eating a sandwich, nutritional chips, fruit, and plenty of water (NO Microwave Meals). No canned energy drinks except Gatorade or Power Aid. We would prefer flavored water to Gatorade or Power Aid, much less sugar. Please do not bring chewing gum or candy to camp. There will be no food or drink allowed outside of snacks and lunch. Parents, if you forget to send lunch for your child, we will bill you \$15 and lunch will be provided as a one-time courtesy.

Do not pack items containing nut products (peanuts, soy, etc.) as these are allergens to some of our campers and potentially life-threatening.

Injuries

Cata Martial Arts makes every effort to prevent childhood accidents during activities, but injuries are a normal part of growth and development. Parents are responsible for medical bills that may arise from accidents. We will notify you in the event of illness or accident and specify if we had to call for assistance from Emergency Services. For this reason, it is important to keep your records with current phone number. Please make sure that if your child is allergic to plants, animals, insects, food, or drinks of any kind, this information is listed in the medical section. We do not immediately notify parents of minor injuries such as cuts and bruises. We will only notify you if we feel medical attention is needed, or if Emergency Services has been called. We will, however, make you aware of any minor injuries upon pickup.