

Davis Fencing Academy

2121 Second Street, Suite A-104

Davis, CA 95616

(530) 758-7087

Membership Form

Last Name _____ First Name _____ Today's Date _____

Address _____ Home Phone (____) _____

City _____ State _____ Zip Code _____ Work Phone (____) _____

Birthday ____/____/____ Gender: M / F Cell Phone (____) _____

Email Address _____ (Used for sending invoices)

If member is 18 years or younger, please complete the following:

Parent or Guardian _____ Phone (____) _____ Cell Phone (____) _____

Address (If different from above) _____ City _____ Zip Code _____

In Case of an emergency, please contact:

Name _____ Relationship _____ Phone (____) _____

I declare that I am in good physical health, and/or have consulted a physician about possible health risks involved in fencing. _____ Initial

I understand that fencing is a high speed, contact sport that can cause severe injury, crippling paralysis, or death. I accept the risks involved and will not hold DFA, any of its members, employees, volunteers and/or coaches responsible for injuries incurred on the premises and while participating in any DFA related activity. I understand that DFA is not responsible for injuries due to the negligence of any of the above. _____ Initial

I understand that anyone not wearing proper fencing equipment (mask, glove, jacket, gym or fencing shoes) will be asked to forfeit their class _____ Initial

I understand that any carpool arrangements made with members or employees of DFA are personal and not professional in nature. _____ Initial

I, _____, agree to pay Davis Fencing Academy membership due by the 5th of the month. DFA reserves the right to discontinue service if member is unwilling to follow on site safety regulations and/or disrupts facility services.

Occasionally a DFA representative will take pictures/video of practices at the club. Please check below IF you would like to modify or disallow the use of these pictures.

-do not use my name - do not use my image

Member Signature _____ Date _____

Parent/Guardian Signature _____ Date _____