

**ABN 56 006 776 914**  
**Dojo (Studio) address:** Level 1, 227 High Street, Prahran  
**Postal address:** 48 Upper Coonara Road, Olinda, 3788  
**www.martial.com.au**  
**Email:** michael@martial.com.au  
**Phone:** 0425 703 757

**FIELD AIKIDO PRAHRAN MONTHLY FEE STRUCTURE:**

- All fees are payable in advance (before the beginning of each upcoming month).
- Training fees are not negotiable or refundable for any reason.

Regular monthly training fees. Conditions apply - see below.	\$ 121.00 per calendar month
Part-time TAFE or University student, Apprenticeships. Conditions apply - see below.	\$ 104.50 per calendar month
Full-time Secondary, TAFE or University student. Conditions apply, see below.	\$ 87.00 per calendar month
Family rates. Conditions apply - see below.	10% discount per person.
Continuation fee. Upon application with Sensei in writing only.	\$ 28.50
Thursday 5.30 pm, Sword & Staff classes Upon application to Sensei in writing.	Add 50% to the fee that applies to you above.

- Your fee entitles you to train 2 pre-selected classes per week during each calendar month.
- Presentation of a current TAFE/University Student Identification Card is necessary if you wish to pay your fees at Part-time student rates, otherwise Regular training fees apply.
- Photocopy of a current TAFE/University Student Enrolment form is necessary if you wish to pay your fees at Full-time student rates, otherwise Regular or Part-time student training fees apply.
- Family discount rates apply when a parent and child/children combination trains where the child/children is/are financially dependant upon the parent, or where siblings train and both are financially dependent upon their parent/s.
- The Continuation fee covers extended periods away from training, replacing your normal fee structure.

**FIELD AIKIDO PRAHRAN PAYMENT METHODS:**

Direct debit your CREDITCARD. <i>Mastercard, Visa, &amp; Bankcard only.</i>	Monthly payments. Debited on or after the 26 <sup>th</sup> of each month. **No Eftpos facility.
<i>Any changes to the nominated amount debited from any credit card needs to be organised with the office on or before the 14<sup>th</sup> of the month preceding such changes to allow time for processing.</i>	
CASH CHEQUE	3 monthly payments only. *Cheques made payable to Field Aikido.

Fee payments support the continuance of your dojo, your training, and your continued growth. Please respect your Sensei and your dojo by making sure your payments are correct and on time.

For August 2011 until further notice

Field Aikido Direct Debit Request  
Credit Card payments for classes.

<b>Customers Authority</b>	<p>I/We (Full-name/s) _____</p> <p>authorise Field Aikido to arrange for funds to be debited from my/our credit account using the credit card nominated below.</p> <p>I/We further request that you debit my/our account in accordance with our agreement and subject to one or more of the following conditions.</p> <p>1. This Direct Debit Request reflects goods &amp; services to be provided for myself &amp;/or (please PRINT the full name of other person/s)</p> <p>_____ &amp; _____</p> <p>2. The frequency of debit is monthly for the amount of \$ _____ starting on _____ (date).</p> <p>3. I/We further authorise you to debit my/our account in accordance with any and all amounts signed for by me/us on a <u>Field Aikido Request for Service/Goods form</u>.</p> <p>4. When a new Kyu/Dan rank is achieved I/we authorise a debit regarding payment of the current Field Aikido grading registration monies which apply to the rank achieved.</p> <p>5. I/We further agree to pay any merchant bank fees incurred by Field Aikido due to insufficient funds being in my account at the time any debit occurs, or due to incorrect numbers or detailed information being her provided by me/us.</p> <p>6. Payments will finalise only when Field Aikido has been notified in writing via letter or email by me of my intent to cancel or change my debit arrangements.</p> <p>Signed by the Customer(s) _____ Date _____</p>
<b>Credit Card to be Debited</b>  All details must be supplied.	<p>Credit Card Numbers (16 digits) _____ Expiry date on card _____</p> <p>_____</p> <p>Cardholder Name (as it appears on the card)</p> <p>_____</p> <p>Signature of Cardholder _____ Date _____</p> <p>Full Name of Card Holder. (Please Print) _____</p>