



Sidekick Foundation, Inc.

8202 Wiles Rd. #156

Coral Springs, FL 33067

Phone: (954) 341-5100 Fax: << please call first >>

Website: www.sidekickfoundation.org Email: arthur.pryor@gmail.com

Dear Studio Owner:

On the next page down is information about the Sidekick Foundation that explains the relationship between you and the Foundation. Following that is an application form for your studio [please complete the highlighted items]; following that is the form you would use to actually put a person on the scholarship program.

Thank you for inquiring about the Sidekick Foundation. Every step of the way we're here to help you accomplish your goals. As a former studio owner myself (about 200 students), I raised about \$16,000.00 a year to support my at-risk kids. Because I ran a studio, I and my board of directors structured Sidekick to be very "studio friendly". We're easy to work with. We do our best to support you so you can help at-risk children, special needs and the elderly. And our program provides the financial support that gives the children the full benefit of martial arts training.

The fastest and easiest way for you to start your scholarship fund is in your area. Within days of receiving your application you will have full access to our website where you can obtain all the information you'll need to get donations from your community leaders, agencies and businesses.

Before you can start fundraising, we must be registered in your state. We are only registered in states where there are studios actively raising funds. These registrations must be renewed every year and the states charge fees, sometimes hundreds of dollars. So there is a minimum amount of fund raising you must do to help us cover our costs.

Thank you for your interest and your commitment to helping others. I look forward to working with you.

In Martial Arts,

Art Pryor

Sidekick Foundation Martial Arts Studio Partner's Program

The Sidekick foundation's Martial Arts Studios Partner program allows studios to create and replenish their own scholarship fund. Partner studios can also receive grants from the Foundation.

The program works as follows:

- ❖ Studio Partners (you) hold a fund-raiser. The money is sent to the foundation which pays you back for any expenses you incurred (such as prizes, printing costs) from what you raised. 20% of what is left goes to the Foundation to help cover its costs (that is our only source of income to pay accountant's fees, telephone, etc.). The balance, 80% is put into "trust" for your studio. That applies to the first \$5,000; the next \$5,000, 85% goes into your account. Anything over \$10,000 90% goes into your account. You use those funds to help at-risk kids take martial arts lessons at your school. You tell us how much you want for monthly tuition, for uniforms, membership in martial arts association, training gear, etc. Virtually anything that is reasonably and customarily related to martial arts training. We send you a check for the gear and 4 months tuition in advance. You email us every four months and give us the names of those you need to be paid for and we send you another check.
- ❖ You must raise \$500.00 per year or you must contribute at least \$100.00 to our operating fund to help cover our overhead, per calendar year.
- ❖ Studio partners may apply for their own grants from government, foundations and corporations using our name. We will help you with those applications. These grants go into your account for your use only.

Note: There are times when the 20% fee to Sidekick is not appropriate or excluded by granting organizations. The Foundation will waive or reduce that 20% when and where appropriate.

You may quit the program on 30 days written notice. The balance in your account will continue to be distributed for your at-risk students until it is used up. Or, you may designate that another partner studio, our general fund, or another charity to receive your funds.

The Foundation provides expert advice in fund raising, from helping you host your own events to helping you apply for grants.

FAQ's:

What is an "at-risk" child? A child with poor to failing grades; a child from a single parent home; a child who is not yet in trouble but is "at-risk" of going down the wrong road. There are many factors that put children "at-risk".

How do I locate these kids? The fastest easiest way is to ask your studio moms and people you know in your neighborhood. There are more there than you can handle!

How do these kids do in class? Generally they tend to do well and stay longer than most kids.

Will the fund pay for equipment, tournaments fees, etc.? Yes, so long as it is a normal part of their training.

How much can I raise? Actually, a lot if you are aggressive about it. We will help you with ideas, documentation, contacts and the like.

Why should I consider doing this? Because it is the right thing to do. It helps the children, the community, your reputation and therefore your business. And, of course, you'll have more paid students.

Why should I choose Sidekick? Because it is the only charity that deals exclusively with martial arts schools, allows you to use your account as you see fit and sends your additional funds from corporate and foundation grants.



**Instructions: Please complete this form where marked and press the email icon on the row of icons above.
A copy will be snailmailed to you for formal signature. Our address is:
Sidekick Foundation, Inc. 8202 Wiles Rd. #156 Coral Springs, FL 33067**

Martial Arts Studio Agreement

THIS AGREEMENT entered into between Sidekick Foundation, Inc. (hereinafter "Foundation") and _____ (participating studio) on _____ / _____ / _____ (date) upon the following terms:

1. Participating school: A school or studio that offers training in martial arts. The Participating School represents it is skilled in such training and wishes to participate in the Foundation's scholarship program. The Participating School shall provide the following information:

School/Studio Name: _____
Address: _____
City, State, Zip: _____
Phone/Fax: _____
Owner/Authorized Rep _____
Tax ID/SSN _____
Email address/website: _____ / _____
Username/Password for our website _____ / _____

2. Purpose of Agreement: Foundation is a not-for-profit corporation with the purpose of improving the quality of life for at-risk children special needs people, the frail and others through martial arts training. The Foundation offers scholarship services, as set forth below, to enable participating schools to provide martial arts training to the targeted population.
3. Scholarship Funding: Participating School shall raise funds for Foundation, and Foundation shall commit eighty percent (80%) of the first \$5,000.00; 85% of the next \$5,000.00 and 90% of funds raised over \$10,000.00 per annum on a calendar basis to pay costs of training eligible students at Participating School, plus all costs reasonably associated with martial arts training as requested by Participating School and agreed to by Foundation.
4. Participating School agrees to raise at least \$500.00 for its own fund each year, or pay \$100.00 to the Operating Fund to help cover Sidekick expenses. Studios that have balances in the fund but do not file for any scholarships for one year agree to donate the balance of their funds to the general fund for use as the charity sees fit.
5. Scholarship Eligibility Criteria: In order to qualify for a scholarship as described above, the applicant must receive a score of at least five points (5) on Foundation's "Qualification Form". Foundation reserves the right to refuse any scholarship application.
6. Terms of Payment: Once the Martial Arts Studio Agreement is executed by all parties, the Participating School may raise funds for Foundation. The funds should be made payable to "Sidekick Foundation" and Participating School shall forward all monies received to foundation within seven days after the completing of the fundraising activity. At any time after receipt of the funds, the Participating School may apply for application of student scholarships up to eighty percent (80%) of funds contributed.
7. Quality Assurance: Foundation may require periodic reports on students to determine student presence and progress.

8. Term of agreement and Termination: This agreement shall continue for a term of one year following execution and automatically renew each year thereafter. Both parties shall execute any modifications to this agreement. Either party may terminate this agreement on 30 days written notice. Remaining balance of funds due Participating School shall continue to be distributed for the benefit of scholarship recipients as previously agreed until depleted. In the event of Participating School's insolvency, bankruptcy or inability to operate, Participating School may elect to have remaining funds used at Foundation's discretion or donated to another 501©3 charity of its choice. This agreement may also be terminated upon either party's insolvency, bankruptcy, assignment for the benefit of creditors on non-discharged levy or attachment; or Participating School's failure to abide by the terms and conditions of this agreement
9. Miscellaneous: This agreement is non-assignable. It shall not give rise to any agency, partnership, joint venture, employment or other similar relationship between the parties. Participating School shall indemnify, save and hold harmless Foundation from any and all liability arising as a result of negligence, intentional or other acts of Sponsor or its agents or employees.
10. Enforcement: This Agreement contains the entire agreement between the parties. It shall be governed by the laws of the state of Florida and the parties stipulate to waiver of trial by jury and to venue in Broward County, Florida. In the event of litigation the prevailing party shall be entitled to recover attorney's fees in addition to court costs incurred.
11. The Foundation reserves the right to refuse or terminate the agreement with any school where we have reason to believe the educational program or supervising organization is not in the best interests of scholarship recipients. Studios that fail to turn over funds raised on the Foundation's behalf will be turned over to the local district attorney for prosecution.

Sidekick Foundation, Inc.

Authorized Signature of Participating School

ID # _____

YES, put my studio in the Sidekick Travel Website. I am enclosing a check for \$50 for my one time listing fee. I understand my account will receive 60% of the travel commissions paid for any travel booked on your website designated to my studio, subject to the terms and conditions of this agreement.

To view this site go to: www.sidekicktravel.org

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APPLICATION FOR STUDENT SCHOLARSHIP

Date: _____ Studio Name: _____ Studio ID#: _____

Name of Student: _____ Date of Birth: _____

Student address, city, state, zip: _____

Name of Parent or Guardian: _____ Phone: _____

Annual Income: _____ Number of Dependents: _____

Release of Liability:

I hereby release and hold harmless the Sidekick Foundation, Inc., its agents, Directors, employees and assigns from any and all forms of liability, claims, demands, actions and causes of actions relating to any damage, loss, or injury, including death, that may occur as a result, directly or indirectly, of the participation of the above named participant in this program. This release is binding upon my child's next of kin, executors and administrators as well as myself and any other related parties. By signing this Release I acknowledge that I have read the Release, understand its contents, and am voluntarily signing it.

Further, I agree that photos and background information of my child and first names or initials may be used by Sidekick foundation, Inc. for publicity purposes without compensation.

Parent/Guardian or Responsible Person Signature:

**TO BE COMPLETED BY SPONSORING SCHOOL –
PLEASE LIST ALL EXPENSES YOU WANT COVERED:**

I hereby attest that my regular monthly school tuition is: \$_____. Requested
monthly tuition for this student: \$_____ Registration fee: \$_____
Uniform \$_____ Patches \$_____ Test fees \$_____

Please list other fees: _____

Signature of School Officer: _____ Date: _____

Scholarship Qualification

Please circle the points that qualify this student Scholarship, and indicate whether they fall into a Level 1, II, or III category. The Level does not effect the approval process. It will be used for future evaluation of the student's progress.

Point Value	Factor	Point Value	Factor
10	Poor to failing grades	10	Classified by school as emotionally disturbed
5	Two year lag in achievement	15	School expulsion
5	Learning disability	15	School suspension
8	Firearm in house	5	Single parent home
15	Drug use by student	7	Elementary school failure
10	Drug use by family member	5	Evidence of family conflict
7	Lack of prosocial (sports or Other outside)activities	5	Low IQ or other cognitive impairment
5	Poor communication between Parents and school	10	Abuse or neglect of any kind
		15	Arrest
		10	Danger of removal from home by State Dept of child care
10	Abuse or neglect of a sibling	10	Either parent charged with failure to protect
7	Any Axis 1 mental disorder (major mental disorder such as ADD, ADHD, Obsessive/ Compulsive Disorder, etc.	10	Anti-social behavior at or prior to age 10
		7	Truancy
5	Low emotional attachment or or estrangement between family members.	7	Domestic Violence
		7	Evidence of poor family coping skills
		7	Mentally or physically handicapped
5	Evidence of a history of "problem behaviors" as defined by family.	10	Adult with mental or physical condition
5	Recent move or mobility	7	Parental lack of negative attitude toward crime or criminal behavior
10	Adult diagnosed by medical physician as having a medical condition that can be helped by martial arts practice.	15	Gang contact
		10	Low family income
		10	Age 65 or older

TOTAL POINTS : _____

Qualifies for (check one)

- _____ Level 1 (5-10 points)
 _____ Level II (11-15 points)
 _____ Level III (more than 15 points)

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I hereby certify the applicant meets the criteria set forth above:

 Authorized School Representative

Date: _____