KOGUSOKU AIKIDO ASSOCIATION

Application for membership

NB NO LICENCE WILL BE ISSUED UNLESS ALL SECTIONS ARE COMPLETED CORRECTLY

Passport No.

1. F	Personal	details:	Please	print	clearly	V
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Name:	First names	Surname
Address &		
Postcode		
Tel no.		Date of Birth
Mobile		Email Adress

2. Club Details:

Club Name:	100
Address &	
Postcode	100 T 7.00 L T
Club Style	7 T T T T T T T T T T T T T T T T T T T
Instructor	Instructor's Grade

3. Type of Licence Required:

Tick One

Junior Student (Under 16 years old)	
Adult Student (16 years old & over)	
Date Paid	

4. Medical details:

If you have any of these medical conditions, tick boxes. Give details overleaf

Epilepsy	Diabetes	Heart Disorder	
Haemophilia	Contagious Disease	Visual Disorder	
Hearing Disorder	Respiratory Disease eg	14.1.14	
	Asthma	83.333 F3.5	

5. Background:

Have you ever been convicted of a crime of violence? Yes / No (If yes please give details):

6. Declaration:

I confirm that all the details given are correct to the best of my knowledge:

I accept that the practice of martial arts / combat sports involves the risk of injury.

Please delete one:

I give my permission for my child to be taken to hospital in the unlikely event of an accident: YES / NO

Signature: Date: Signature of Parent / Guardian if under 16 years old:

Membership Fee:

Adults: $\pounds 20 = 01 \text{ May} - 31 \text{ July} / \pounds 15 = 01 \text{ Aug} - 31 \text{ Oct} / \pounds 10 = 01 \text{ Nov} - 31 \text{ Jan} / \pounds 5. = 01 \text{ Feb} - 30 \text{ April}$ Juniors and Full Time Students $\pounds 10 = 01 \text{ May} - 31 \text{ July} / \pounds 7.50 = 01 \text{ Aug} - 31 \text{ Oct} / \pounds 5. = 01 \text{ Nov} - 31 \text{ Jan} / \pounds 2.50 = 01 \text{ Feb} - 30 \text{ April}$

Please supply 2 x Passport style photographs with first application

PLEASE DO NOT SEND CASH THROUGH THE POST – THANK YOU