



*Please print clearly in block capitals*

**Annual Karate Licence Application Form**

For equal opportunity purposes please enter ethnic origin

* Name	* Please Tick	Female	Male
* Surname			
* Address			
* Post code			
Telephone No:			
Email Address			
* D.O.B.	* Age		
Association Number (If Renewal) 140.....	Ref Number		

\* Please give details if you suffer of any medical conditions or allergies.

Name of club Please circle **EKK** **MO-ICHIDO SK**

Current Grade Others:

**Subscription Fees** Please tick

New Member {£45.00} 2nd Sibling ( £40.00)		Please supply with old Licence slip
Renewal up to 4th Kyu {£35.00} 2nd Sibling (£30.00)		
Renewal 3rd to 1st Kyu {£30.00}		
Renewal Dan Grades {£25.00}		

**If new member please provide a passport size photo with this application.**

\* I give/do not give († Please delete as applicable) permission for my child to appear in photographs and/or video footage of karate-based activities, which may be published.

Signature: .....

\* Signature: \_\_\_\_\_ \* Signature of Parent/Guardian if under 16 years of age

\* Date of Application: \_\_\_\_\_ Licence Expiry Date

\* Emergency Tel: no

Please Note (GDPR); As from the 25th of May 2018 a new law will be implemented, therefore you will have more control of how we keep your data, By Signing this form you will agree for us to keep your data in our system. The data that we record in our system serves only for the Association to get you informed of news letters or class cancellation etc. This form will be kept on yearly basis and destroyed after A) one year B) as soon you no longer part of EKK Association and C) if you wish at anytime to be removed from uor system. For more info please visit www.ekkassociation.com

# Signature.....

Please return form to your instructor. Cheques must be made payable to : **Moichido Martial Arts**

Please allow 21 days for processing. N.B The Association reserves the right to refuse an application.

**Office use Only**

Association Number new members Only. (180 )	New	
Renewal Date.		
Receipt No.		

\* Must be filled by the applicant.