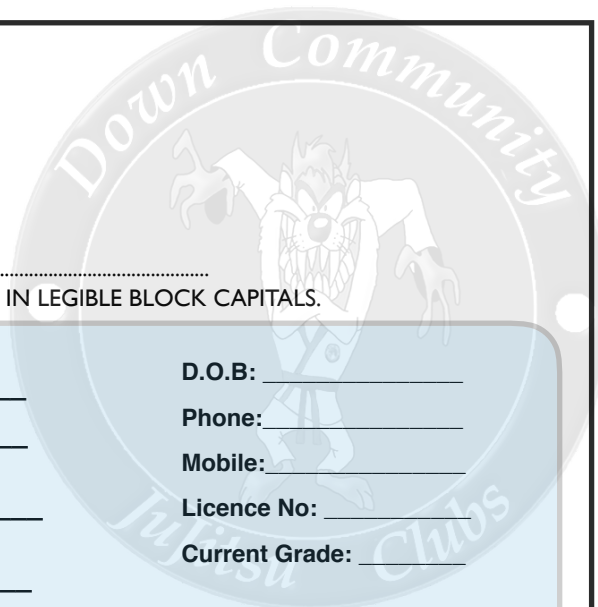


Student Membership Form

Down Community Jujitsu Clubs



Club Name: **Date:**

*Form should be filled out by a parent or guardian on a child's behalf. PLEASE COMPLETE IN LEGIBLE BLOCK CAPITALS.

Name: _____ **D.O.B:** _____
Address: _____ **Phone:** _____
_____ **Mobile:** _____
_____ **Post Code:** _____ **Licence No:** _____
Email Address: _____ **Current Grade:** _____
Name of who to contact in an emergency: _____
Relationship: _____ **Phone:** _____

MEDICAL INFORMATION

Please state any medical conditions which may be aggravated by exercise: _____

(We may require a Doctors letter to confirm you are fit to train)

Please circle any of the following that apply...

- | | | | |
|---------------------|----------------------|----------|---------------|
| Heart Trouble | Migraine | Asthma | ADD/ADHD |
| High Blood Pressure | Haemophilia | Seizures | Back Pain |
| Chest Pains | Diabetes | HIV | Hay fever |
| Nervous Disorders | Faint / Dizzy Spells | Hernia | Allergy |
| Other | | | |

DECLARATION

I agree to abide by all rules, notices and terms of membership and at all times uphold the traditions and spirit of Martial Arts. It is accepted and understood that participation in the Martial Arts carries the risk of injury, as in all contact sports. I understand that the DCJJC Logo, its trademarks and designs, can only be used with prior written consent of that organisation. I declare I am fit to train in the Martial Arts.

PLEASE NOTE YOUR MEMBERSHIP IS ONLY VALID WHILST YOUR INSTRUCTOR & CLUB REMAINS IN FULL MEMBERS OF THE CMAA AND WILL EXPIRE SHOULD THEY LEAVE.

I consent to photographs and / or filming for sporting purposes or PR under DCJJC supervision

YES

NO

(If you do not consent please make your instructor aware of this)

Have you ever been convicted of a crime of violence?

YES

NO

If yes, please give details:

Signed **Date**

(to be signed by Student or Parent / Guardian, if student is under 18yrs)

Relationship to Student

It is the policy of our Governing Body that all individuals training should be fully insured and in membership.

Membership Payment (including free insurance for one year from start date).

Junior Membership: £25

Senior Membership: £31

Junior Renewal: £20

Senior Renewal: £26

Signed: (Instructor) **Date**