NAME OF CL	IR·			GRADE:		
SURNAME:	J.D.		FORENAME:	GIVADE.	<u> </u>	
ADDRESS:		_	POREINAIVIE.	ļ		
ADDRESS.						
POST CODE:		TELEPHONE:	Τ			
EMAIL:	1.222.1.6142.		D.O.B:		AGE:	
21417 (12.			12.0.2.		7.02.	
PLEASE NOTE THE FOLLOWING RULES AND REGULATIONS:						
1) I WILL NOT SMOKE WHILST IN THE DOJO / DURING TRAINING SESSIONS.						
2) I WILL NOT DRINK ALCOHOL WHILST IN THE DOJO BEFORE OR DURING TRAINING SESSIONS.						
3) I WILL NOT						
4) ANY FORM OF BULLYING WILL NOT BE TOLERATED AND COULD LEAD TO EXPULSION.						
•						
DECLARATION TO BE COMPLETED BY APPLICANT						
I UNDERSTAND THAT FAILURE TO ABIDE BY THESE RULES AND REGULATIONS MAY RESULT						
IN MY MEMBERSHIP BEING REVOKED.						
I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE FOREGOING DETAILS ARE						
CORRECT. IN THE EVENT OF MY BEING ACCEPTED, I UNDERTAKE TO ABIDE BY THE						
CONSTITUTION AND BYE LAWS OF GOSHINKAN KARATE ASSOCIATION, FEKO.						
I DO NOT SUFFER FROM EPILEPSY OR ANY OTHER ILLNESS THAT WOULD ENDANGER OTHERS						
OR MYSELF W	HILE TRAINI	NG IN KARATE.				
			<del>-</del>			
SIGNED:			LICENCE RENEWAL FEE: £10.00			
Signature of p	arent or gua	ardian (if applicant is unde	er 18)			
	1					
DATE:				NEW LICENCE FEE: £15.00		
				( Includes g	grading bool	k)
PHOTO PERMISSION - I DO / DO NOT - GIVE PERMISSION FOR PHOTOGRAPHS OR VIDEOS						
TO BE TAKEN OF MYSELF OR MY CHILD. (DELETE WHERE APPROPRIATE)						
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SIGNED:			J	DATE:		
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OFFICE USE O	NLY:					
LICENCE NI-			4			
LICENCE No: RENEWAL DAT	rr.		-			
			-			
MEMBERSHIP	INO:	1				

ANY QUERIES CONTACT NIKI: 07799 - 806534