

The Hamilton Bugeikan Karate Club

Application for membership.

Surname;

First names;

Address;

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Phone (home)

Phone (work)

E-mail

Date of birth

1. Do you suffer from any disease, illness or allergy? Yes/No.

If yes;

2. Are you currently taking any medication? Yes/No.

If Yes;

3. Have you ever been convicted of a crime (other than traffic offences)? Yes/No.

If Yes;

4. Have you had any previous Martial Arts training? Yes/No.

If Yes; Style?

For how long?

Grade?

Disclaimer;

I believe all the information stated above to be the truth and I understand that all the information given, will be treated in the strictest of confidence. I guarantee that I partake in the training conducted by The Hamilton Bugeikan Karate Club of my own free will, and, although rare, injuries are possible and I can, in no way, hold either the club, or it's instructors responsible for any injury. I understand that the club rules are in place for my own safety and I acknowledge that any breach of these rules can result in my permanent expulsion from the club without any refund.

Signed;

Date;.....

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..... (Signature of parent/guardian if under 18 years of age)