



Black Tiger Shotokan



LICENCE APPLICATION

Please complete form in BLOCK CAPITALS

Male	<input type="checkbox"/>	Surname:	
Female	<input type="checkbox"/>	Forenames:	

Address:			
			Postcode:
Home Telephone			Mobile Telephone
Date of Birth			Email

CLUB NAME:	BLACK TIGER SHOTOKAN	INSTRUCTOR	S.Blakeney SANDAN
CURRENT GRADE:		LICENCE NO. or EXPIRY DATE	

Have you ever been convicted of a criminal offence? (please tick)	Yes	<input type="checkbox"/>	NO	<input type="checkbox"/>
If Yes please give details:				

Have you ever suffered, or do you suffer, from any of these medical conditions? (please tick where appropriate)					
Heart Disease	Yes	No	Liver Problems	Yes	No
Kidney Problems	Yes	No	Any injuries	Yes	No
Breathing Problems	Yes	No	Any other illnesses	Yes	No
Blood Disorders	Yes	No	Are you taking medication?	Yes	No
If you have answered YES to any of the above, please give full details:-					

LICENCE APPLIED FOR (please tick appropriately):			
New Membership	£15	Membership Renew	£12

DECLARATION - I certify that to the best of my knowledge and belief, the information given in this application is correct. I accept that the training of Karate involves physical contact and that there is a risk of injury.

Signature of Applicant	Signature of Parent/Guardian if applicant is under 16
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Date	
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The B.K.A. reserve the right to decline membership at their discretion

Return Completed Form to:- Simon Blakeney Sensei, 3rd Dan Black Tiger Shotokan INCLUDE 1. Cash or Cheque (to S.Blakeney) (tick) 2. 1 x Passport Size Photo (New App Only) (tick)	Office use Only Cheque PO Cash Amount E.K.F.No..... Renewal Date
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