



MEMBERSHIP APPLICATION FORM

BLOCK LETTERS PLEASE!

FULL NAME	DATE OF BIRTH:
ADDRESS/POST CODE	GENDER:
WHAT ARE YOU REASONS FOR TAKING UP JU-JITSU & WHAT DO YOU HOPE TO ACHIEVE?	MOBILE NO:
WHERE DID YOU HEAR ABOUT US?	E-MAIL:

Do you have any Disabilities (Physical/Mental or Special Needs that could affect your training? Do you suffer from any of the following: Migraine, Hay Fever, Hemophilia, diabetes, Heart Disorders, Respiratory Problems, Epilepsy, Aids, Hepatitis, Back Problems or any other disorder which may affect you being able to participate? If so, please give details (continue on separate sheet if necessary).....

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Declaration

In completion of this form of application for registration to Kokoro Kai Ju Jitsu I accept that participation in martial arts carries a risk of serious injury and I hereby exonerate the said association from losses either personal, or of articles or injuries of any nature or cause whatsoever. I understand that Ju Jitsu is a contact sport/martial art and give permission for appropriate contact to be made with myself and or my child when being instructed in the context of martial arts. I further declare that I am fit to train in the martial Arts. If I should cease to train or resign or allow my membership to lapse I will return all documentation, any loaned equipment, and that all my grades will be ceased to be recognized by the Governing Body the B.J.J.A.GB. I agree to abide by the rules of the above and train only in the system of Kokoro Kai.

PARENT/GUARDIAN CONSENT FOR ELECTRONIC RECORDING, PHOTOGRAPHY, VIDEO & OR PUBLISHING

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(Kokoro Kai Ju-Jitsu. *Club Name* :.....)

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Signature; _____ **Date** _____

A doctors note of fitness must be enclosed if you are over 40 and suffer from any of the following conditions:- Hypertension, Cholesterol above 240mg/dl, Smoker, Diabetes, Family history of Heart Disease before age 55, Symptoms of cardiopulmonary or metabolic disease, Chest Pains, Dizziness, Ankle swelling, Rapid Heart Rate, (100 bpm or above) Claudication (Pain with movement of a limb) Heart Murmur.

Club & Name of Sensei.....	Fee Enclosed £.....
NEW/REN.....	SENIOR/JUNIOR.....
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