**Contact Details / Enrolment Form**

Please complete this form in full and return to info3cskc@gmail.com



**3 Counties Shotokan Karate Clubs**

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| --- | --- |
| Name of Student |  |
| Club / Venue(i.e. Ashfield / Chesterfield / Dronfield / Mansfield / Staveley) |  |
| DOB of Student |  |
| Age as of 1st September 2020 |  |
| Name of Parent / Guardian(If Student under 18) |  |
| Telephone No.(This must be for Parent / Guardian if Student is under 18) |  |
| Email Address(This must be for Parent / Guardian if Student is under 18) |  |

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| Details of any disabilities, conditions, allergies, special needs or cultural needs that might affect you. If none, please state NONE. |  |
| Details of any medication that you are using which may adversely affect you, physically or mentally. If none, please state NONE. |  |
| Details of any crime of violence that you have ever been convicted of. If none, please state NONE. |  |

**Notes:**

All the above information will be completely confidential, and the data provided will be deleted in the event of 8 consecutive weeks of non-attendance unless prior communication from the Student or Parent / Guardian.

Disclaimer: Karate is a martial art and contact sport. People can and do get injured and we cannot accept responsibility for any such injury, loss or accident arising from your participation in our training or competitions and ask that you are aware, agree and accept this by completing and return this form to info3csks@gmail.com

I also agree to abide by the rules and regulations of TISKA.

|  |  |
| --- | --- |
| Date |  |

 07989449817

 a.tyers04@gmail.com

 www.3cskc.org