

DO MU KYOKU KARATE RYU

APPLICATION FORM



Shotokan
Karate

Student's Surname:		DOB:	
Student's First Name:		Age:	
Medical Limitations: (Please give details of any medications/ injuries/ disabilities that may affect your practice)			
Parent(s) Name(s) (If under 18):			
Address		Postcode:	
Telephone Number:		Mobile Number:	
Email Address:		How did you hear about us:	
My start date:		Annual re-registration:	
Have you practiced Karate before? Y / N If yes, please give details below:			
Present Grade: Attached copy of licence <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Achieved: Attached copy of certificate <input type="checkbox"/> Yes <input type="checkbox"/> No	
Last practice date:		Reason for changing school/club:	
Payment Terms Payments are to be made on a termly basis according to the payment and activity structure. Payment Details REX OVIRE BARCLAYS BANK SORT CODE: 20-34-69 ACCOUNT: 13507920 PayPal (Int'l Clients): rex.ovire@gmail.com		Training Requirements . Minimum Time in training for 10th Kyu to 6th Kyu is 2 lessons a week for 3-6 months . Minimum time in training for 5th Kyu to 4th Kyu is 2-3 lessons a week for 4-6months . Minimum time in training for 3rd to 1st Kyu is 3-4 lessons a week for 6 months to a year	
APPLICATION FEE: £30.00		What days do you plan to attend? <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
I agree to terms and conditions of Do Mu Kyoku Karate Ryu payment and training requirements. I attach the £30.00 application and licence fee.			
Print Name:		Signature(of parent if under 16):	
Date:			