



國際松濤館空手

Membership & Licence Form

Please complete this form in **BLOCK CAPITALS**

TYPE OF MEMBERSHIP:		NEW:	RENEWAL:
FIRST NAME:		SURNAME:	
ADDRESS:			
POST CODE:			
TELEPHONE NUMBER:			
EMAIL ADDRESS: <i>We do a lot of our communication by email – so please write as clearly as possible!</i>			
DATE OF BIRTH:	AGE:	GENDER:	SCHOOL NAME / OCCUPATION:
PHOTOGRAPHY / FILM: <i>Please note that sometimes we take photographs and/or video footage of club training sessions and grading/tournaments. These are primarily used for publicity and promotional purposes by the ISK (which includes social media, newsletters, leaflets, website pages etc.) Full details on this can be found on our website under our Safeguarding Policy. www.iskkarate.com</i>			
DATE OLD LICENCE EXPIRED:		GRADE:	
SIGNATURE: (Parent if under 18)			DATE:

FOR OFFICE USE ONLY:

LICENCE #:	DATE ISSUED:
INSTRUCTOR NAME:	CLUB NAME:

RECEIPT:

LICENCE #:	DATE ISSUED:
AMOUNT PAID:	ADULT: CHILD:

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www.iskkarate.com

ALL CLASSES ARE RUN BY EXPERIENCED ISK QUALIFIED & DBS CHECKED INSTRUCTORS