

- Please fill in **ALL FIELDS**, or your application is likely to be declined
- Complete in **BLOCK CAPITALS**
- Please send a **STAMPED ADDRESSED ENVELOPE** so that we can return your order
- Applications failing these, will not be processed

# KAICHOU KAI KARATE ASSOCIATION— LICENCE APPLICATION FORM

**PLEASE SEND TO:**

Enquiries to Samuel Rogers— Licencing Officer  
 samueljrogers@btinternet.com



**KAICHOU KAI KARATE ASSOCIATION**

**PO BOX 4439**

**HORNCHURCH**

**RM12 9FX**

TODAY'S DATE:

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OPTION:	PRICE:	PLEASE MARK (X) IF NEEDED
SENIOR LICENCE	£25.00 (plus £5.00 surcharge if licence expired more than two months ago)	
JUNIOR LICENCE	£22.00 (plus £5.00 surcharge if licence expired more than two months ago)	
ASSOCIATION	£5.00 (in case of loss, damage or theft), Free with first licence	

Personal Details

SURNAME:

FIRST NAMES:

PRIVATE ADDRESS:

POST CODE:

PREVIOUS LICENSE NUMBER (IF ANY)

EMAIL:

OCCUPATION:

DATE OF BIRTH:

INSTRUCTOR:

GENDER: (please tick)  
 Male:  Female:

MOBILE:

HOME PHONE:

I hereby give Kaichou-kai association permission to use my photo (in the form of photograph or video footage) for media purposes. This may be in the form of social media such as website, Facebook, Twitter or maybe for advertising the club.

**Please circle: I do / do not give permission for my image to be used**

I hereby give Kaichou-Kai association permission to withhold my information on a club database for the benefit of Kaichou Kai.

**Please circle: I do / do not give permission for my information to be held on the club database**

By signing this you declare that:

I certify that to the best of my knowledge and belief, the foregoing details are correct and in the event of my being accepted I undertake to abide by the Constitution and Bye-laws of Kaichou Kai Karate Association, together with any amendments that may be made during my period of membership.

**Signed (by parent/guardian if under 16)** \_\_\_\_\_ **date:** \_\_\_/\_\_\_/\_\_\_\_\_

All applicants are required to give details of their last grading in the space provided below

<b>For Official Use Only</b>	
New Licence No.	<input type="text"/>
Cheque No.	<input type="text"/>
Date Issued	<input type="text"/>
Fees received	<input type="text"/>

Date	Place of exam	Grade awarded	Examiner's name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Emergency contact details:

NAME:

NUMBER: