



FIRST TIME APPLICATION FORM TO JOIN THE EGKA - 2022

You must complete all questions marked with a red (\*) asterisk

Please send this completed application form together with your cheque made payable to "E.G.K.A." to:

E.G.K.A. Membership C/o CMAFA
Heathvale Bridge Road, Ash Vale,
Aldershot, Hampshire GU12 5EU.

Upon receipt we will create an account within our members' database and your Dojo instructor will be able to confirm your membership online in due course. At this point he/she will issue you with an EGKA Licence Book.

\* Please tick only one of the boxes below:

- \* Adult licence (18yrs and over) £45.00
\* Junior licence (4 to 17 yrs) £25.00
\* Family licence (max 2 adults) £80.00
\* Additional adult family member £20.00 Each

For a family membership application:

- \* Treat me as the lead family member.
When applying for a family membership you must submit separate forms for all the family members at the same time and nominate one person to be responsible for paying.
For more than two adults per family licence £20 additional each.

Now, please complete the following information, in legible block capitals (please):

- \* Surname: \* First name(s): \* D.O.B:
\* Instructor: \* Dojo: \* Grade: 10th Kyu
\* Home address:
\* Post code:
\* Telephone: \* E-mail: \* Male Female

Please note it is assumed that when the applicant is a junior or infant, the signing guardian resides at the same address given above. If this is not the case, please give the guardian's contact addresses, telephone number and email on the back of this form.

\* Do you have an unspent criminal conviction involving physical violence? Please state "No" or give brief details of the conviction:

\* Please tick to confirm you have read and agree the EGKA Consent statement and EGKA Data Privacy Notice:
[ ] https://www.egka.org.uk/media/pdfs/Consent\_Statements\_EGKA.pdf [ ] https://www.egka.org.uk/media/pdfs/Privacy\_Notice\_EGKA\_v1.pdf

DECLARATION

I am applying to join the EGKA I agree to observe the rules and regulations of the EGKA at all times. I accept that karate may result in me sustaining personal injury during training and when I participate in competitions. I also accept my moral and legal obligation to demonstrate restraint at all times and to avoid violent confrontation whenever possible. If I am forced to defend myself, I accept the Law only permits me to use sufficient force to stop my assailant(s) from continuing their assault on my person or any other people I may be defending at the time. To pursue my attack beyond that point would be illegal and I may be prosecuted.

\* Signature: \* Date:
(Parent / Guardian if applicant is under 18 years of age)

A pre-existing medical condition does not necessarily preclude an individual from taking up karate, but there is a presumption that all individuals take regular advice from their doctor as to whether they are medically fit enough to participate in training and competitions. You are invited to make a voluntary disclosure below if you have a medical condition you would wish attending medical staff to be advised of in the event of a training incident: