



# Takumi Karate Do Member Form

*(all fields must be completed in full were appropriate)*

*(return to an instructor ASAP – this is not a licence fee)*

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ \*

Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (mobile)

Current Licence No. \_\_\_\_\_ Date Joined Club. \_\_\_\_\_

Current Membership Number: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Date of Last Grading: \_\_\_\_\_ Date of Last Course: \_\_\_\_\_

PI Insurance Expiry Date (instructors only): \_\_\_\_\_

First Aid Certificate Expiry Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*We will add your email address to our mailing list unless you specifically ask us not to. You may remove your name from the list at any time and your email address will not be sold or used for any purposes other than the communication of information about the club and activities. If you would not like your email address to be added the please tick here**