

HARA SHOTOKAN KARATE ACADEMY

Insurance and Registration Application

Club Name	New Member	Renewal	Old Licence No	Expiry Date
	<input type="checkbox"/>	<input type="checkbox"/>		
Surname	First Name	Age	D.O.B.	Occupation
Address				Postcode
Telephone No.	Mobile No.	Emergency No.	Email Address	

Medical Questionnaire					
Please indicate if you or a close member of your family suffers from any of the following:					
Haemophilia <input type="checkbox"/>	Asthma <input type="checkbox"/>	Coronary Heart disease <input type="checkbox"/>	Diabetes <input type="checkbox"/>	High blood pressure <input type="checkbox"/>	Rheumatic fever <input type="checkbox"/>
Have you recently had:					
Bone fracture <input type="checkbox"/>			Major operations <input type="checkbox"/>		
Do you suffer from:					
Back or neck pain <input type="checkbox"/>	Pain in any joints <input type="checkbox"/>	Torn muscles <input type="checkbox"/>	Sprains <input type="checkbox"/>	Arthritis <input type="checkbox"/>	Rheumatism <input type="checkbox"/>
Are you currently on any medication?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you involved in any other physical pastime?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you know of any reason why you should not participate in any exercise program?				Yes <input type="checkbox"/>	No <input type="checkbox"/>

General Questionnaire	
Are you presently charged with, or have you ever been convicted of a criminal offence, not considered spent under the rehabilitation of offenders act? <i>Please discuss any specific problems with your instructor</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you give your permission for you and your child to appear in photographs and video recordings that may be taken during events, and for these to be used for publicity, promotional, website or display purposes?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Fee & Photos		
Insurance licence membership fee, <i>please make cheques payable to 'HARA SHOTOKAN ACADEMY' (No cash, please)</i>	New Member £25.00 <input type="checkbox"/>	Renewal £20.00 <input type="checkbox"/>
If a new member, two passport photos are needed to be enclosed.	1 <input type="checkbox"/>	2 <input type="checkbox"/>

Signatures, (if under 18, signature of a parent or legal guardian)		
Signature:	Print:	Date: