

RENEWAL

PLEASE COMPLETE IN BLOCK LETTERS

CENTRAL ENGLAND SHOTOKAN KARATE ASSOCIATION

2012

SURNAME: FORENAMES:

ADDRESS:

..... POST CODE:

DATE of BIRTH: CLUB..... Current Grade:

HOME TEL: MOB NO:

Email address (parents if student under 16 yrs)

I WISH TO RENEW MY Junior / Senior LICENCE

Annual Fee is £22.00

Please make all cheques payable to: **CESKA**

Please return this completed Licence form with fee & your Red Licence to your club instructor

Please note all licenses must be renewed in January of each year

DECLARATION TO BE COMPLETED BY APPLICANT

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

I certify that I have no Criminal Record.

Nor any convictions, bind over orders or cautious pending or otherwise. If so please give full details on the reverse of this form.

(Please tick box to confirm this)

Signed: Date:

Signature of Parent / Guardian

(If under 16yrs) Date: