



JOINING FORM

Haringeyjudoclub18@yahoo.com tel:07944403373

PERSONAL DETAILS-this form will be kept strictly confidential, the information given is at your own discretion:

Surname: First name:

D.O. B: Age: Gender:

Home address: Post code:

Home Tel: email:

EMERGENCY CONTACTS-Please state the person(s) who should be contacted in case of an accident/incident:

Name..... Tel.....

MEDICAL INFORMATION: Please detail below any important medical information; including illnesses, disabilities, previous injuries or allergies which our coaches should be aware of-please include any special needs or learning difficulties:

JUDO ASSOCIATION MEMBERSHIP-Please provide BJC (British judo affiliate) membership details:

Association: License Numb: Expire Date:

I certify that to the best of my knowledge and belief the information given is correct and, I consent to the information on this application being included on the Club’s database. As a member of HJC, I agree to become a member of the British Judo council and to adhere to Club rules, policies, procedures. I accept that no child under the age of 12 yrs can be left without a responsible adult present for the duration of the session. Judo is a full contact activity and that it is common that students of varied age, weight, ability and both males, females practice together. **I agree to my son/daughter/child in my care, taking part in all the activities of the Club. The Club, their Staffs, members and guest shall not be liable for personal injury or diseases crises sustained by any members or visitors on the Mat, Club premises or when the Club takes part to judo event, except in so far as it can be proven that this related to wilful act of negligence or default.** All reasonable steps will be taken to contact me and to deal with the revealed issues appropriately. In the event that I cannot be contacted, I consent to a “Responsible Club Official” acting “In Loco Parentis”

We like to publish videos, photographs activities and achievements on our website, social media pages and sometimes in the local newspapers; Please inform us if you object to your child’s image being used.

Any HJC member who doesn’t pay or renew his membership at the due time, will be taken off the club's register; if they have not attended for one month, without informing the club of the reason why. Due to the waiting list-their place could be offered to someone else.

Signed: Date:

Applicant if over 18 years / Parent or Guardian under 18 years.

Parent or Guardian print Name: **Relation to Applicant:**

Payment option chosen: 1-day session 10- Days sessions Monthly membership

HJC Official: **Date:**