**Please tick as appropriate:**

New Registration  Renewal

**Please include the following documentation with your application form**

1. Copies of Instructors Qualification: (Dan grade cert)
2. Copy of Club/instructors public liability insurance
3. List of your club members (Section 4)

**Section 1: Club Details**

Formal name of your Dojo/Group: Click here to enter text.

Contact address: Click here to enter text.

Website address: Click here to enter text.

Contact phone number: Click here to enter text.

Email address: Click here to enter text.

**Section 2: Dojo/Club Instructor Details**

Name of Dojo/Club Instructor: Click here to enter text.

Address: Click here to enter text.

Contact phone number: Click here to enter text.

Email address: Click here to enter text.

Grade:Click here to enter text.DAN JKA:  Other Association:

Other association details: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA instructor: A B C D

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA Judge: A B C D Date obtained: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA Examiner: A B C D Date obtained: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

**Section 3: Other Club Instructor details**

Name of other instructor1: Click here to enter text.

Address: Click here to enter text.

Contact Phone number: Click here to enter text.

Email address: Click here to enter text.

Grade:Click here to enter text.DAN JKA Other Association:

Other association details: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA instructor: A B C D

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA Judge: A B C D Date obtained: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA Examiner: A B C D Date obtained: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

Name of other instructor 2: Click here to enter text.

Address: Click here to enter text.

Contact Phone number: Click here to enter text.

Email address: Click here to enter text.

Grade: Click here to enter text.DAN JKA Other Association:

Other association details: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA instructor: A B C D

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA Judge: A B C D Date obtained: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

JKA Examiner: A B C D Date obtained: Click here to enter text.

Registration Number: Click here to enter text.

Date obtained: Click here to enter text.

**Section 4: Club members applying for Individual Membership**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First name** | **Surname** | **Gender**  **Male/Female** | **Date of Birth**  **DD/MM/YYYY** | **Grade** | **Date obtained** |
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