



## Registration & Disclosure Form (rev.2)

We respectfully ask that all students, parents/guardians complete a registration and disclosure form to ensure that your instructor and the club are aware of any relevant medical information and contact details prior to training. If you have any questions regarding this form, please speak directly with your instructor before commencing any type of training.

### About the student

This information is required to identify the student in records pertinent to their registration with our governing body.

**FULL NAME**.....

**ADDRESS**.....

.....

..... **POST CODE**.....

**HOME PHONE**..... **MOBILE**.....

**AGE**..... **DATE OF BIRTH**.....

### Communication

We require an e mail address so that the student may be kept informed of upcoming club events and activities, also we can make contact directly and in confidence if necessary. An e mail address is required to book classes and courses through the "Smoothbook" class booking system and if it is elected to authorise payment for training and services via the "Stripe" payment system. Please also like our Facebook page to see what's going on within the club.

**E-MAIL**.....

PLEASE ENTER

### Photography & Videography Consent

From time to time we like to share photos or videos of our students with the rest of the club. This may be via Facebook or e mail. We may also like to use photos from training to help advertise our class to others – for example, via our website.

**Are you happy for you / the student to be included in photography, and for it to be used as described above?**

**YES / NO**

(PLEASE CIRCLE AS APPLICABLE).

Email: [unionkaratedoclub@gmail.com](mailto:unionkaratedoclub@gmail.com)



## **Club Rules & Disclaimer**

We're keen to create a safe, enjoyable space where everyone is free and able to learn martial arts without harassment or intimidation. Our club operates a zero tolerance on bullying or any such harassment during or outside of training. The instructor is here to keep the student safe and help them learn – we ask that the student please show respect and listen carefully to instructions when given, as they are for their own protection.

Training within our club is done entirely at the student's own risk. We ask that the student operates a common-sense approach – its combat training, we're not made of metal – we may get hurt.

We'll do all we can to protect the student, but injuries can from time to time occur. The student agrees to undertake training at their own risk and must make reasonable arrangements by their own accord should the student require insurance for personal accident or liability. The student must hold a current bmaba association licence prior to partaking in a grading examination or tournament. Talk to your instructor if you are in any doubt.

**Please confirm you are happy to agree to our club rules and disclaimer.**

**I AGREE**

***SIGNATURE*.....**

## **Medical Disclosure**

**This is really important.**

*We need to know if the student has any past or current medical conditions, injuries or medication that might need to be disclosed to the instructor.*

This is stored in the utmost of confidence and will be treated with sensitivity. Our instructor needs to know if there are any injuries or conditions present that might heighten the student's risk of injury or harm when undertaking different exercises and drills.

Should the worst happen, and an injury occur, it's essential that the instructor is aware of any underlying medical conditions or injuries that might have contributed to or caused an incident.

**Please talk with a GP before training with us if there are any concerns or any medical conditions past or present to ensure it is safe to proceed.**

## ***MEDICAL CONDITIONS AND INJURIES***

Please think carefully and include any past or present injuries and medical conditions that might affect the student's ability to participate. This might include, for example, a previously broken left wrist that is now weakened, or a knee that is weak (but has not been investigated by a doctor), or it could refer to a past or on-going condition – such as Asthma or Arthritis.

Please also include details of any allergies the student might have.

**MEDICATION OR SPECIFIC REQUIREMENTS**

We're committed to offering an equal opportunity for everyone to participate regardless of any medical requirements or mobility issues.

Please note any medication the student has that might affect the way they act during the class or might change their abilities during exercise. Please also note any disabilities you would like recorded, or any other requirements that may be required.

**PREGNANCY**

Unfortunately, our classes are not suitable for anyone who is, or may be, pregnant due to the nature of impact and contact. We won't ask you to confirm a pregnancy – but please talk to your instructor now, or in the future, should this become relevant.

**EMERGENCY CONTACT / NEXT OF KIN**

Please indicate who we should be contacting in the unlikely event of an incident.

NAME: .....

CONTACT NO: .....

RELATION: .....

**SIGNATURE**..... **DATE**.....

I, the above-named student, confirm that the details enclosed in this document are accurate and true to the best of my understanding, and I declare that I am fit to participate.

I, the parent/guardian of the above-named student (under 18) confirm that the details enclosed in this document are accurate and true to the best of my understanding, and I declare that the student is fit to participate. If the parent/guardian is not present during training and the student requires assistance or first aid, I give consent for the instructor to act "In Loco Parentis".

Please refer to our privacy policy under safeguarding at <https://www.unionkaratedo.com>.