

SHIKATA SHOTOKAN KARATE ENGLAND

JAPAN SHOTOKAN KARATE ASSOCIATION
BRITISH SHOTOKAN KYOGI
INTERNATIONAL SHOTOKAN-RYU KARATE-DO-SHIHANKAI



S.S.K.E. LICENCE FORM.

Shikata England



Application/Renewal (delete as appropriate)

ALL SECTIONS MUST BE COMPLETED IN BLOCK LETTERS.

Last Name: _____ First name(s): _____

Address: _____

Post code: _____

Telephone No.: _____

Occupation: _____

Date of birth: _____

PLEASE ANSWER ALL QUESTIONS.

HAVE YOU EVER HAD ANY SERIOUS ILLNESS? YES/NO

HAVE YOU EVER SUFFERED ANY SERIOUS INJURY? YES/NO

HAVE YOU EVER BEEN FOUND GUILTY BY A COURT OF LAW FOR ANY CRIME INVOLVING VIOLENCE? YES/NO

If you have answered yes to any of the above questions please give full details to your club instructor in a sealed envelope addressed to The Secretary Shikata Shotokan Karate. The S.S.K.E. reserve the right to decline an application without giving a reason.

NAME OF CLUB Jacksons Lane Shotokan GRADE _____

I agree to abide by all club rules and understand that I am liable to disciplinary action by the committee if any of the rules are broken.

I understand that the Associations records are maintained on computer and that I consent to my details being recorded in this manner.

Signed: _____ Date: _____

Parent/Guardian Signature if under 16 years of age: _____

FOR OFFICE USE ONLY

Chairman	Vice chairman