

TROWBRIDGE JUDO CLUB

President & Founder: Mr W H French A.R.Ae.S. Chairman & Senior Coach: Mr D Truckle, 5 th Dan Instructors : Mr D Mallows, 1 st Dan Mr D Trippick, 1 st Dan Mr C Rawlings, 1 st Dan	Trowbridge Judo Club Innox Road Trowbridge Wiltshire Club Telephone: 01225 768721 Home Telephone: 01225 763859
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MEMBERSHIP APPLICATION FORM

Name		Date of Birth	
Address			
Telephone			
School or Occupation			
Please state any medical conditions or illnesses that may affect the member, such as Asthma, Epilepsy, Fainting spells, etc.			
Please state any allergies or known reactions to first aid treatment, such as elastoplasts, sprays or creams. We do not administer tablets or medicines of any kind to anyone.			

DECLARATION

I Hereby wish to become a member of the above named Judo Club. I agree to abide by the rules and regulations applicable to Judo Club members and I will uphold the spirit and traditions of Judo. I hereby indemnify the Trowbridge Judo Club and it's servants against all losses, due to injuries, damages or personal articles, etc. of any nature and cause whatsoever.

Signature of Parent/Guardian or Senior member over 18 years		Date	
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The Trowbridge Judo Club has been established for over forty years and is fully covered by the legal insurance requirements, copies of which may be viewed on request from committee members.

It is a requirement of the Data Protection Act 1998 that persons give their written authorisation to have their details recorded. By signing this form, you are giving permission for your personal details to be recorded by Trowbridge Judo Club. Your details will not be distributed to any other third party and will not be used for any non-judo related functions.

Fee received by		Date	
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