



LICENCE TYPE

Student Licence £25
Blackbelt £25

www.prostylekickboxing.co.uk

LICENCE APPLICATION FORM

The licence is the students own personal insurance and is the student's responsibility to look after and to renew it annually. For your own safety PRO STYLE KICKBOXING and the Insurance company ask that all students complete the application below so that the Insurance company have a clear understanding of medical history and suitability for martial arts. All information will be treated with strictest confidence. Please complete form in BLOCK CAPITALS

Name _____ Age _____ D.O.B _____
Tel _____ Mobile _____
Address _____ Postcode _____

Is this your first Licence YES / NO? Old Licence No _____ Expires _____ Grade _____

- ① Have you previously been a member of a martial arts class? YES / NO
- ② Have you suffered any injuries in the last in the last six months? YES / NO
If YES, give full details _____
- ③ Do you suffer from or have you ever suffered from (Please highlight):
a. Haemophilia b. Diabetes c. Epilepsy d. Nervous Disorders
e. Respiratory Problems f. Asthma or Hay Fever g. Mental Disabilities h. HIV/AIDS
- ④ Have you ever suffered a serious illness? YES / NO
- ⑤ Have you ever suffered a serious accident? YES / NO
- ⑥ Have you ever been advised by a Doctor against taking part in any physical sport? YES / NO
If you have answered YES to any of the above, please give full details _____

- ⑦ Have you ever been convicted of a violent criminal offence? YES / NO
If YES, give full details _____

All payment to P.CHILDERLEY Pro Style kickboxing reserves the right to refuse this application and revoke any licence.

DECLARATION

I understand I have fully completed all the above clearly to be eligible for my Pro Style Kickboxing / MAFCUK insurance. I understand that all safety regulations during training should be adhered to and safety equipment worn at all times. I declare that to the best of my knowledge and belief there are no known incidents outstanding that might give rise to a claim. I certify that all information given above is correct; I understand that I must adhere to the student code at all times.

Signed _____ Parents Signature if-18yrs _____ Date _____ Total Enclosed £ _____

FOR OFFICE USE ONLY

Licence no. _____

Fee received £ _____ Cash / Cheque Date received _____ Expiry Date _____