DAIGAKU KARATE KAI - JUNIORS

OKI NAWAN GOJU RYU KARATE

Self-defence - discipline - Confidence - Respect - Strength - fitness



www.gojukaratekids.co.uk dkk_lewis@yahoo.co.uk 07958363522

2nd December 2013

Dear Parent/ Guardian,

Over the last couple of years many parents have asked me if I was able to sort some other way of paying rather than bits cash here and a cheque there; then me chasing people up to see if they've paid! Fantastic news, at last from January 2014 Standing Orders will be up and running. This will consist of an on-going monthly payment. This will definitely make my life easier and from what I can gather many of you as well.

If you are able to, can you please tick and sign the 'Gift Aid' section at the bottom of the Standing Order Form, I would be much obliged. With the new mailing system and payment system I feel that DKK is becoming more professional association.

Could you fill in the three forms and pass back to me:

- 1. Standing Order Form Can you please pass the formback to me for my references and 'Gift Aid' information. I will then send off to the bank. Please let me know if you're doing it yourself on line.
- 2. Registration Form including The Standing Order Contract (This will be a one off form)
- 3. The Licence form this is also a down load on the web site (no payment required, part of the Standing Order)

I look forward to taking the club forward in 2014.

Yours sincerely,

Dan Lewis

Principal Instructor Daigaku Karate Kai

For more info please call me 07958-363522 or email dkk_lewis@yahoo.co.uk We will also be regularly updating our new website with news and information: www.gojukaratekids.co.uk, plus regular emails on mailchimp

Find us on Facebook by searching for 'DKK Juniors' and Twitter @DKK Juniors

Children 16+ are also welcome to train with me at the adult club in Portishead.

Learn what your child is learning, get fit and get motivated; Adult Karate & Bootcamp

Go to www.gojukaratebristol.com and www.gojukaratebristol.co.uk for more training times and information.





Portishead & Bristol Goju Ryu Junior Registration Form

Date of	Registration:						
Name:			DOB:				
Parent/	Guardian details						
Title:	First name:	Surname		Title:	First name:		Surname
Home a	ddress:			Home ad	 ddress (if differer	nt):	
Home number: Mobile				Home number: Mobile			
Email ac	Idress:			Email ac	ldress:		
Does this person have parental responsibility? Yes / No				Does this person have parental responsibility? Yes / No			
Does any	one else have parental r	responsibility for this child	d? Yes /	No (If	yes, please provide	details	on separate sheet.)
Emerge	ncy Contact Details (p	lease provide details of two p	people w	e can contac	t if we are unable t	to get ho	old of you)
Name:			Telephone number:			Mo	bile number:
Address:						Rel	ationship to the child:
Name:			Telephone number:			Mo	bile number:
Address	:		1			Rel	ationship to the child:



About your child						
Please detail any additional/special needs your child has: (please provide full details)						
Child's Doctor						
Name of Doctor:						
Address:	Telephone:					
	I					

As parent/guardian of the above child I have read, fully understood and am satisfied with the details supplied above and agree to my son/daughter taking part. I know of no medical reason why he/she should not participate. I will fill out a yearly insurance form for personal accident cover for my son/daughter when given out. I will also ensure suitable arrangements are made to pick up my child.

SIGNED (PARENT/GUARDIAN)

DATE:

I understand that as with all physical activity there is a risk of injury (this is no greater for martial arts than any other activity). In the event that my child requires basic first aid assistance I consent to them being treated onsite by a qualified first aider.

In the unlikely event that they are involved in a serious accident I expect to be contacted immediately on the above telephone numbers.

In the event that my child requires immediate medical treatment before I can get to the hospital I hereby authorise the instructor present to consent to any emergency medical treatment necessary to ensure the health and safety of my child on my behalf.



SIGNED (PARENT/GUARDIAN)

DATE:

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Photograph Permission Form

The use of photographs is an important developmental tool which is widely used in play and educational settings for recording, sharing and displaying activities that your children have undertaken. At DKK we take the issue of child protection very seriously and we would never knowingly publish an image of your child without your consent.

As the parent or carer of the child named below, I grant permission for images of my son or daughter to be used for the following purposes:

	01 1							
[Electronic and printed information, displays and exhibitions at the Club							
[Website for Club							
[Promotional material for the Clu	Promotional material for the Club						
[Club records of my child							
[Local newspaper or magazine	Local newspaper or magazine						
[National newspaper or magazin	National newspaper or magazine						
[Other organisation's website	Other organisation's website						
[Other organisation's promotion	Other organisation's promotional material						
[Other	Other						
	erstand that personal details or names o would allow them to be individually iden	f any child in a photograph will never be given in such a way tified.						
	erstand that this image will NOT be used cause offence, embarrassment or distres	for anything which may be viewed as negative in tone or that s for the child or their parent or carer.						
I und	erstand that there will be no payment fo	r my child's participation.						
	Child's name:	Parent/carer's name:						
-	Date:	Parent/carer's signature:						
<u>An</u>	d FinallyStanding Orde	er Contract						
	e understand that if my child or childress notice and continue to pay 2 more	en wish(es) to stop training with DKK that I will give a monthly payments:						
I req	uire at least one signature from a par	ent/guardian.						
	e of Child:	D .						
_	ed: Name:							
		(Mother, father, Guardian, etc).						

