



**Kington St Michael CE Primary School
Judo Club Application form**



Main Hall: Thursdays 3.00-4.00pm

Surname: _____ **Date of Birth:** _____

Forenames: _____

Address: _____

_____ **Post Code:** _____

Home Tel No: _____ **Mobile No:** _____

E-Mail: _____ **Club:** _____

Please list any disabilities (physical or mental) or any other medical condition that could effect your Judo training, e.g. Asthma, Hay fever, Migraine, Epilepsy, short sightedness, deafness.

I consent to my child/children to participate at Shodan Judo Club. I acknowledge that Judo is a contact Sport and whilst injury is very rare and Shodan Judo takes all necessary precautions, I understand the risk can never be 100% removed.

I authorise first aid to be administered by our first aid qualified coach if necessary

I will be collecting my child from the after School Club

My child can walk home alone

I / My Child agrees to abide by the SJA rules, policies and procedures and acknowledge that failure to do so may result in my exclusion of the Judo club.

Signed: _____ **Date:** _____

(Signature of Parent or Guardian)

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The session fee is £4 which can be paid on weekly pay as you go system or a termly basis by Cash, Cheque or BAC directly to us. Cheques are payable to Jason Cooke and bank transfer details are: Bank – Barclays, Sort Code – 20 84 61, A/C number – 20029246, Ref – Childs Name.

Judo suits can be purchased through Shodan Judo but you are welcome to source your own and or course there is no rush to do so. A SJA License is needed to participate in gradings and competitions but is not needed to attend the Judo club at Kington St Michael Primary School.

For More information on Shodan Judo and our Clubs and events then please contact Jason or Jo on 01249 661002 / 07502 285832 or visit our website.



Office Only: R / E