



Kuro Obi Martial Arts

ABN 51 729 967 216

Member of the International Federation of Karate Kyokushinkai Australia Inc (IFKKA)

REGISTRATION FORM

Note: if student is a minor (under 18 years of age) then a parent or guardian must complete and sign this form.

Student's Name:	
Address:	
M <input type="checkbox"/> F <input type="checkbox"/>	Date of Birth:

Home Phone:	Work Phone:
Mobile Phone:	Email:
Occupation:	

Parent / Guardian contact details:	Phone:	Email:
Parent / Guardian contact details:	Phone:	Email:

Person to contact in case of an emergency:	
Name:	Phone No:

To assist **Kuro Obi Martial Arts (KOMA)** in its promotions, can you please advise how you came to know about this karate school?

Sign, poster, banner, publication? Where? School newsletter? Which school?

Mailbox leaflet drop? Demonstration? Where?

Recommended by? Website – please give name or URL?

Other - please specify:

Confidence, fitness and the ability to defend yourself are only three of the many benefits of karate. In order to assist you in attaining your goals, would you please specify which aspects you want to achieve:

Please circle any of the following that apply:

Self confidence Fitness Stress relief Self defence Weight control Social outlet

Any other reason?

Have you participated in any form of martial arts before? **Yes** **No**

If so, please specify what style, where you trained, when and what level you attained:

CONSENT	By signing below, I agree to act responsibly with the techniques taught to me by KOMA and in line with the International Federation of Karate Kyokushinkai Australia Inc. (IFKKA) Student Manual and Syllabus and as may be changed and updated from time to time. Under no circumstances shall the information and techniques learned at KOMA be used outside scheduled karate training time(s), unless necessary for self defence and/or during events sanctioned or organised by the KOMa or the IFKKA.
	I also agree to the terms and conditions on page 2 of this agreement, as well as the terms and conditions on accompanying financial agreement.
	I consent to the declaration and participation.
Applicant's or Legal Guardian's Signature :	Date :/...../..... dd mm yyyy

Please see page 2 for terms and conditions

HEALTH INFORMATION

Do you suffer, or have you ever suffered, from any medical condition or injury that may affect your ability to train? **Yes / No**
e.g. asthma, high blood pressure, insulin-dependent diabetes, previous knee or back injuries etc...

If yes, please specify:

Are you on any medication/s that may affect your ability to train? **Yes / No**
E.g. asthma inhaler, blood pressure medication, insulin etc...

If yes, please specify:

NB: should any of the information specified in relation to injury or illness listed above change, the onus is on the student to inform the instructor as soon as they become aware of this, and prior to taking part in any further training sessions.

PRIVACY INFORMATION

The personal information collected by **Kuro Obi Martial Arts (KOMA)** and the **International Federation of Karate Kyokushinkai Australia Inc (IFKKA)** on this form will be held in line with the National Privacy Principles NPP (Privacy Amendment (Private Sector) Act 2000). Personal Information also includes information we collect in the course of providing services to you and communications between you and us. The information collected enables us to properly advise you in relation to your martial arts training.

Any personal or sensitive information collected about you will be used and disclosed by us so we can provide you with the services you have requested or otherwise enable us to carry out our functions. For example, we must make our instructors aware of information about your health, so they can safely instruct you in martial arts; participate in fitness programs and so on.

We will add your name, address, phone numbers, fax number and e-mail address to our database, and this may be used for ongoing marketing and educative purposes. If we elect to retain such personal information, you have our commitment to your privacy. The type of marketing and educative activities we undertake includes forwarding material to you keeping you updated in relation to relevant matters including new training programs / classes, seminars, tournaments, training camps, dietary, general health / fitness related information. At any time you do not wish to continue receiving this information, please advise us in writing and we will remove your details from the marketing database.

KOMA and the **IFKKA** do not and will not rent, sell or otherwise disclose your personal or sensitive information to any other company or organization, without your prior consent where that consent is required by law.

TERMS AND CONDITIONS

1. I do hereby make application to join **KOMA** and the **IFKKA** and, if accepted, agree to abide by the rules as outlined in the **IFKKA** Student Manual under "*Dojo Etiquette & Procedures*" and "*General Etiquette*", as may be updated or changed from time to time. In the event of any injury suffered by me while participating in such training / classes or grading events, or while on any **KOMA** or the **IFKKA** premises, I agree to accept full responsibility.
2. **KOMA** and the **IFKKA** do not warrant that the use of protective equipment will completely eliminate the possibility of accident or injury but will reduce the risk of accident or injury. In recognition of the possibility of an accident or injury connected with my martial arts training I waive any right or cause of any kind of action arising from such activity and any liability against **KOMA** or the **IFKKA**, its volunteers, officers, agents, employees, or instructors. In the event I may require First Aid I consent for the appropriate First Aid to be administered by **KOMA** or the **IFKKA**.
3. I acknowledge that **physical contact will be used by instructors of KOMA or the IFKKA, other students, and authorised individuals as part of my karate or self defence instruction and give full consent to any physical contact as may be required or is customary to martial arts and self defence training.**
4. I acknowledge and understand that my participation in activities associated with membership of **KOMA** and **IFKKA** may involve a significant degree of physical exertion or physical risk which may cause pain, personal injury or death. By signing this document and participating in the activities associated with **KOMA** and the **IFKKA**, I am not aware of any medical or physical condition other than those listed previously which would lead me to believe there is a risk to my health.
5. I acknowledge that **KOMA** and the **IFKKA** take no responsibility for the loss or damage of my personal belongings other than loss or damages caused directly by wilful acts or omissions or negligence of the operator.
6. I acknowledge & agree that any photographs, videos, or audio taken of me whilst participating in any class, grading, tournament, demonstration or camp be available to **KOMA** and the **IFKKA** to be used on their websites or in any advertising/promotional material as they see fit, and I waive the right to any compensation for appearing in these materials.
7. **KOMA may make any modifications to the class schedule as deemed necessary without affecting scheduled tuition payments. This may include altering the current class schedule, closing the school on public holidays or for a special event or any other purposes. Such modification does not relieve the student of their payment obligations. Reasonable notice will be provided if possible.**
8. **KOMA** may close the school for a period not exceeding four weeks per year for, but not limited to, necessary maintenance and/or annual closedown.
9. I acknowledge that all information provided by me is true and correct at the time of completion and should this change in the future I will advise **KOMA** and the **IFKKA** of any changes immediately I become aware of such changes.