

PETERBOROUGH SHINBOKU KARATE CLUB

NEW STUDENT INFORMATION

Welcome to our club, in order for you to train with us it is necessary for you or your parent or Guardian to read and complete this form, any personal information that we receive will be treated in the strictest confidence.

About us- the club is a member of the English Karate Governing Body with affiliation to the Federation of the English Karate Organisations. The instructors are certified Black Belts, fully insured and licensed and have been registered with the NSPCC endorsed F.E.K.O. Int./ F.E.K.O Child Protection Policy.

About where we train- the training area or Dojo is situated at the South Grove Community Centre, Woodston, Peterborough.

Safety- the centre has a main entrance to the front, an emergency exit at the rear of the hall. It also has an access door and an emergency exit from the hall to the lounge with a further emergency exit to the rear of the centre. In the unlikely event of a fire raise the alarm and notify the instructor, evacuate to the meeting point at the rear of the centre in the car park and wait to be checked off the training list. Fire extinguishers are located in the centre but do not attempt to fight the fire if your exit is impeded. If you receive an injury notify the instructor immediately. If you have an injury prior to training notify the instructor before training commences. If you have a condition, which may be affected during training, make sure you have your treatment with you. Juniors (under 16 years) must not leave the hall without permission of the instructor, if you wish to go to the toilet ask the instructor and notify him on your return.

Personal Hygiene-Students should always be clean with manicured finger and toenails to prevent injuries, Karate suits (Gi's) or training attire should also be laundered.

Bad behaviour is not tolerated! Bullying is not tolerated!

About You, please return this section to one of the instructors. **Date** _____

Name _____

Address _____

Postcode _____

Phone _____

Emergency contact telephone number _____

Please advise if you have any medical conditions which may effect you when practising Karate

Please sign this form if you are 16 years of age or over. If you are under 16 years of age it must be signed by your parent or guardian.

Signature _____ **Print name** _____