



MEMBERSHIP APPLICATION FORM

PLEASE COMPLETE THIS APPLICATION FORM IN BLOCK CAPITALS

NEW APPLICATION RENEWAL RE-STARTING LOST DETAILS

TAGB SCHOOLPREVIOUS TKD SCHOOL

PREVIOUS ID No LICENCE No..... EXPIRY DATE.....

GRADE No.....KUP / DAN SENIOR / JUNIOR (under 16 years) MALE / FEMALE

DO YOU SUFFER FROM ANY OF THE FOLLOWING? Tick if Yes HEART DISORDER / ASTHMA/ MIGRAINE/
EPILEPSY / DIABETES / NERVOUS DISORDER / HAEMOPHILIA/ HAY FEVER / Any others.....

HAVE YOU ANY PHYSICAL INJURIES OR DISABILITIES **YES / NO**

If **YES** please give details.....

DATE COMMENCED TRAINING.....DATE OF LAST GRADING.....

FORENAMES.....SURNAME.....

ADDRESS.....

.....

.....POST CODE.....

TEL NoEMAIL.....

OCCUPATION.....

DATE OF BIRTH..... (This **MUST** be completed)

HAVE YOU BEEN SHOWN YOUR INSURANCE DETAILS **YES / NO**

HAVE YOU BEEN SHOWN OUR PRIVACY POLICY **YES / NO**

DECLARATION

I understand that there is an inherent risk of physical injury in the practice and learning of a contact sport such as Tae Kwon-Do. Whilst the TAGB and Association schools and Instructors will take all reasonable steps to minimise the likelihood of an accident, the risk of physical injury cannot be eliminated. There is particular risk in the context of competitions and grading exercises which by their nature are likely to result in an individual approaching and potentially exceeding the limits of their skills and physical ability. The acceptance of an individual's application to participate in a competition or to undertake a grading exercise does not constitute and should not be considered as constituting any form of confirmation or assurance by the TAGB or any Association School or Instructor to the effect that the individual has the necessary skill or physical ability to safely complete such competition or grading exercise, it being the individual's sole responsibility to judge such matters for themselves. If an individual has any doubt whatsoever as to their ability to safely complete any exercise in the context of a competition, grading exercise or otherwise it is the responsibility of the individual to withdraw from the same.

The TAGB, and Association schools and Instructors accept no liability for injuries sustained in the course of practicing and learning of Tae Kwon-Do save for injuries attributed to negligence of the TAGB, and Association schools and Instructors. Insurance in respect of such risks is included in your annual membership, In signing this declaration I accept the above recited disclaimer of liability and also agree to abide by the rules of the TAGB as amended from time to time should I be accepted as a member. I also accept the information provided on this application will be treated in line with the T.A.G.B. Privacy Policy. Full details of this policy are also available online: www.tagb.biz

APPLICANT'S SIGNATURE.....DATE.....

(Parents' if under 18 years)

INSTRUCTOR'S SIGNATURE.....DATE.....

INSTRUCTOR'S NAME PHILIP WESTON-RILEY.....GRADE.... 6th Dan