**…. Judo Club**

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Parent/Guardian if U18)

Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_

Has the participant tried Judo before? Yes No

**Medical Details:**

Please provide any medical details or injuries which the coaches need to be aware of for the training session:

Emergency Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent/Guardian/Next of Kin)

**Declaration:**

Are you/ your child fit and able to take part in a physical judo session? Yes No

I understand that my/my child personal information will be held by …? Judo Club securely on computer for the purpose of registering for this club and any information will be used for club purposes only.

I am happy for myself /my child to have photographs/videos taken which may be used for social media and/or promotional material? (Names of children will not be used) Yes No

Signed: (Parent/Guardian if U18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_