

University of London Tae Kwon-Do

Licence Application & Membership Form

Name:	Renewal Details	
Address:		Licence Number:
		I.D. Number:
		Expiry Date:
Postcode:		Present Grade:
Telephone Number:	Email Address:	
Occupation:	Emergency Contact Details	
Sex:		Name:
Date of Birth:		Telephone Number:

Do you suffer from any medical or mental conditions that may affect your training (Asthma, Diabetes etc)?
If so please provide details below.

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 UoL Tae Kwon-Do and Instructors will take reasonable steps to minimize 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 their limits of skills and physical abilities. The acceptance of an individuals application to participate in a competition or undertake a grading exercise does not constitute and should not be considered as constituting any form of confirmation or assurance by UoL Tae Kwon-Do or Instructors to the affect that the individual has the necessary skill or physical ability to safely compete such competition or grading exercise, it being the individuals 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 competition, grading or otherwise, it is the responsibility of the individual to withdraw from the same.

UoL Tae Kwon-Do and Instructors accept no liability for injuries sustained in the course of practicing and learning Tae Kwon-Do.

In the signing of this declaration, I accept the above-recited disclaimer of liability and agree to abide by the rules of UoL Tae Kwon-Do as amended from time to time. Membership takes effect from the date your application has been processed and should be renewed with your instructor 3-4 weeks before it expires.

Applicants Signature _____ **Date** _____

Parents Signature (if under 18 years old) _____ **Date** _____

Instructors Signature _____ **Date** _____