

INDIVIDUAL LICENCE APPLICATION AND REGISTRATION FORM (ISSUED MAY 2011)

www.seku-karate.co.uk

This form must be completed in full and sent with the appropriate fee, cheques made payable to "Shotokan of England Karate Union" and a 220 x 110cm (8.5 x 4.5 inches) stamped addressed envelope to:

> THE LICENCING OFFICER SHOTOKAN OF ENGLAND KARATE UNION 77 THE DALE, WIDLEY WATERLOOVILLE HANTS PO7 5DD

		11AN13, 1 01 3DD		
PLEASE COMPLET	E THIS FORM IN FULL USI	NG BLOCK CAPITALS		
TITLE:SURN	AME:	FIRST NAMES:	DOB:	
ADDRESS:				
		POST CODE:	TEL:	
PRESENT GRADE:.	PARENT CLUB:	CLUB INS	TRUCTOR:	
PREVIOUS SEKU MEMBERSHIP NO: EXPIRY: EXPIRY:				
EMAIL ADDRESS (F	Please Print Clearly):			
Out Many Line			Operations Operations	
Cut Along Line Continue Overleaf:			Continue Overlear:	
i	BANK STANDING ORDE	R MANDATE (PLEASE SEND	TO YOUR BANK)	
Full Name:		Address:		
			Post Code:	
			amount of: £ 25.00	
Name of your Bank:				
•		-		
			Post Code	
Your Bank Sort Co	de:You	r Bank Account Number:		
Bank Instruction: P	lease pay the stated amou	ınt on the same day each ye	ear starting:01//	
To:	Lloyds TSB Bank plc, N	lorth End Branch, PO Box	1000 BX1 1LT	
Account Name:	SHOTOKAN OF ENGLA	AND KARATE UNION		
Account Number:	02184159			
Sort Code:	30 - 96 - 11			

Signed:.....Date:.....

IF THIS IS YOUR FIRST APPLICATION PLEASE MAKE THE FIRST PAYMENT BY CHEQUE AND SEND IT TO THE 'LICENCE OFFICER' THEN SET UP THE STANDING ORDER AND SEND TO YOUR BANK FOR FUTURE PAYMENTS

INDIVIDUAL ANNUAL MEMBERSHIP/INSURANCE	FAMILY MEMBERSHIP (All will have the same start date)			
Individual Member £25.00	First Member £25.00 Second Member £25.00 Third and subsequent members £12.50			
Membership/Grading Record E	Book is free with the first application			
IMPORTANT				
Please write 'R' in the box if you need to renew or 'N'	if a new SEKU member applying for the first time			
Please tick the box if you have completed the attached standing order form and sent it to your Bank				
 Please notify the License Officer if in future, you char questions has become 'YES' 	nge your name and/or address or if the answer to the following two			
PLEASE ANSWER THE FOLLOWING QUESTIONS. (Delete	e as applicable)			
Have you any health problems likely to impair activityHave you ever been involved in serious crime?				
	out it you will be unable to take part in SEKU events. Please make ur SEKU License/Membership will be renewed automatically by the original Application each Year			
DECLARATION TO BE COMPLETED BY APPLICANT				
'I certify that to the best of my knowledge and belief, the above Association and by-laws of the SHOTOKAN OF ENGLAND Poeriod of my membership.	re details are correct. I undertake to abide by the Articles of CARATE UNION , together with any amendments made during the			
	Date:			
(Parent or Guardian if under 16 yrs				

PLEASE NOTE: SEKU will be holding your membership details on computer.