



CDA ACADEMY MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Students Name:		Parents Name:	
Date of birth:	Mobile:	Land line:	
Current address:			
City:	County	Post Code:	
Email address (Please print)			
Occupation:	Gender:	Do you have a Criminal record: Y / N	
Medical Conditions:		Special Requirements?	

EMERGENCY CONTACT

Name:	
Nature of Relationship:	Phone:

PAYMENT DETAILS

You can pay for your annual membership by cheque / cash / bank transfer or a once a year standing order

Bank Details

Account name	L Trunks T/a CDA
Bank	Santander
Account number	80434512
Sort Code	09-01-28

Cheques should be made payable to **CDA**

TELL US WHY YOU ARE INTERESTED IN MARTIAL ARTS (TICK APPROPRIATE BOX)

SELF DEFENCE	FAMILY ACTIVITY	DISCIPLINE
FITNESS	COMPLIMENT ANOTHER ACTIVITY	MEET FRIENDS
BUILD SELF CONFIDENCE	CO-ORDINATION	OTHER

WHERE DID YOU HEAR ABOUT CDA?

SIGNATURES

I understand that there is an inherent risk of physical injury in the practice and learning of a contact sport such as martial arts. Whilst the 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 consulting any form of confirmation or assurance by the instructors of CDA to the effect that the individual has the necessary skill or physical ability to safely complete an exercise in the context of competition, grading exercise or otherwise it is the responsibility of the individual to withdraw from the same.

The CDA instructors accept no liability for injuries sustained in the course of practicing and learning mixed martial arts save the injuries attributed to negligence of the CDA schools and instructors.

I understand by signing this form I am bound by the rules & regulations of CDA and that my instructors may cancel my membership at any time without making a refund if they believe my action will put me or any other student of CDA at physical risk, danger or if my actions should bring CDA or its instructors names in to disrepute.

I understand that this membership fee is not for insurance for any accidental injury sustained by me.

Signature of applicant:	Date:
Signature of parent or legal Guardian (under 18)	Date: