

# ALLIANCE of SHUKOKAI KARATE

OFFICE USE ONLY

## PART A – MUST BE COMPLETED BY THE INSTRUCTOR

SHUKOKAI KARATE ACADEMY	NEW LICENCE	<input type="checkbox"/>	RENEWAL	<input type="checkbox"/>
EXISTING LICENCE No.	START DATE	STUDENTS GRADE		

## PART B – MUST BE FULLY COMPLETED BY THE APPLICANT

FULL NAME	OCCUPATION		
ADDRESS	TELEPHONE		
	MOBILE		
	E-MAIL		
POSTCODE	DATE OF BIRTH	SEX	<b>MALE / FEMALE</b>

Please do not send your licence book when applying for a renewal.

DELETE AS APPLICABLE

## PART C – MEDICAL RECORD - MUST BE FULLY COMPLETED BY THE APPLICANT

SUPPLY ALL RELEVANT DETAILS PLEASE

DISABILITY

PLEASE TICK THE BOX

YES OR NO

YES OR NO

PRE-EXISTING CONDITIONS	<input type="checkbox"/>	<input type="checkbox"/>	DRUGS MIS-USE	<input type="checkbox"/>	<input type="checkbox"/>
AIDS	<input type="checkbox"/>	<input type="checkbox"/>	HEAMOPHILIA	<input type="checkbox"/>	<input type="checkbox"/>
DIABETES	<input type="checkbox"/>	<input type="checkbox"/>	HEART DISORDER	<input type="checkbox"/>	<input type="checkbox"/>
EPILEPSY	<input type="checkbox"/>	<input type="checkbox"/>	ASTHMA	<input type="checkbox"/>	<input type="checkbox"/>

## PART D – POLICE RECORD – SUPPLY FULL DETAILS

CRIMES OF VIOLENCE	<input type="checkbox"/>	<input type="checkbox"/>	PUBLIC DISORDER	<input type="checkbox"/>	<input type="checkbox"/>
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## CADET / ADULT APPLICATION PLEASE READ CAREFULLY

I  apply for membership of the ALLIANCE of SHUKOKAI KARATE GROUP on behalf of (DELETE) \* myself / my child / my charge and request that you take out insurance cover on behalf of the above applicant. Notwithstanding the provisions of insurance cover, the applicant shall hereby agree to conduct themselves in an orderly and safe manner whilst training. The applicant shall further agree to have and show regard for the safety of themselves and fellow students.

## ETHNICITY – Please supply details by ticking one box below

CAUCASION    
 BLACK CARIBBEAN    
 BLACK AFRICAN    
 INDIAN    
 BANGLADESHI    
 PAKINSTANI   
 CHINEASE    
 BLACK OTHER    
 OTHER NON WHITE    
 OTHER (DETAILS PLEASE)

**WARNING** I fully understand that whilst the utmost care will be taken to ensure safety during training or whilst participating in competition, I am aware that the training in, and practice of **KARATE** involves a real risk of personal injury.

I grant permission to both Shukokai Karate Academy and Alliance Of Shukokai Karate to hold the information contained upon this form on computer and accept that it may be passed on to relevant insurers and the Karate Governing Body via any appropriate affiliating associations. Furthermore, I accept the terms and conditions of the insurance scheme detailed overleaf, which I have read and understand.

Signed \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

LICENCE APPLICATION

## INSURANCE SYNOPSIS

### ALLIANCE of SHUKOKAI KARATE

Shukokai Karate Academy and the Alliance of Shukokai Karate are members of the Federation of English Karate Organisations (FEKO).

To comply with the A.S.K. pre-requisite which states that all Karateka should possess an A.S.K. licence which includes personal and member to member insurance, you are required to purchase a combination A.S.K. / F.E.K.O. licence / insurance which also includes your record book for grading's with your initial application.

This annually renewable licence is your personal registration with A.S.K. and is your passport to your karate training. You require an up to date licence to be able to train at your club or to take advantage of any F.E.K.O. or A.S.K. event and to be eligible for grading.

Details of the basic mandatory insurance cover are listed below, if you have any details regarding Section C or D you **MUST** declare them with this application.

**URGENT NOTE** – PLEASE NOTE THAT THERE IS NO WEEKLY BENEFIT PAYMENT, DUE TO LOSS OF EARNINGS, AVAILABLE WITH THIS POLICY. SHOULD YOU REQUIRE SUCH COVER, YOU MUST ARRANGE THIS YOURSELF ELSEWHERE.

#### F.E.K.O. INSURANCE SYNOPSIS

EMPLOYED ADULTS (16-65) are entitled to claim for Capital Benefit and third party liability.

UNEMPLOYED ADULTS (16-65) are entitled to claim for Capital Benefit and third party liability.

CHILDREN (Under 16 years) are entitled to claim for reduced Capital Benefit and third party liability.

Retired Persons (over 60/65 years) are entitled to claim for Capital Benefit and third party liability.

#### DETAILS OF BENEFIT

##### 1. CAPITAL BENEFITS

£15,000.00 payable on death  
£25,000.00 permanent total disablement or loss of eye(s) or limb(s).  
For Children £2,000.00 payable on death (legal limit).

##### 2. THIRD PARTY LIABILITYS

Up To £250,000.00 cover against any one claim for damages made against a **CURRENT** licence holder.

##### 3. Exclusions

Accidents resulting from pre-existing conditions.  
Self-inflicted injuries.  
Reckless regard for safety. (Personal or Third Party).  
Any period of incapacity not certified by a medical practitioner.

#### URGENT – NOTES CONCERNING MEDICAL CONDITIONS

Should any applicant suffer from any medical condition or pre-existing medical condition which may affect their training, then a letter **MUST** be forthcoming from their G.P. or similar, stating that, in their opinion, the said person is fit to train with Karate.