



**KUNUNURRA TAEKWONDO INC
REGISTRATION FORM 2021**



Student's Name	DOB	Age	Belt Colour & Level	New Members (+\$10 manual)		Existing Members	
				Little Dragons/ Imugis	Dragons	Little Dragons / Imugis	Dragons
				\$110	\$165	\$100	\$155
				\$110	\$165	\$100	\$155
				\$110	\$165	\$100	\$155
				\$110	\$165	\$100	\$155

Bank Account Details: Kununurra Taekwondo BSB 306118 A/c 4172991

Please Name EFT deposit by family name and Term (T1, T2, T3, T4) as reference

Telephone: Home Work:..... Mobile:

Email:.....

Legal Guardians: (If student under 18)

1.
(Name and mobile contact)

2.
(Name and mobile contact)

Medical Conditions - Provide details of any medical conditions the instructor should know about

.....
NOTE: Student accident insurance is not intended to replace Medical/Hospital benefit insurance and it is recommended that you have Private health insurance.

Optional Additional Emergency Contact Other than Legal Guardians

Emergency Contact
(Full Name and Relationship e.g.: Friend, Aunt, Sibling)

Telephone/Mobile:.....

Photos: Important: (Please circle whether you agree or do not agree)

Photos containing the above students can be published on the Club's website, members only Facebook page or in local newspaper. YES NO

Signed..... Date:.....
(Student/Parent or Guardian of student (if under 18 years of age)

Email Address Checked _____ Member Register Updated _____ Insurance Processed _____
Sign In/Sign Out Updated _____ Scanned to OneDrive _____ Application to Train Rec'd _____
Medical Register Updated _____ Debtor Setup _____ SOY Fees Paid _____

KUNUNURRA TAEKWONDO CONDITIONS OF MEMBERSHIP

Please Circle Yes or No to each of these statements (N.B. All conditions must be accepted for Membership to be approved).

<u>YES</u>	<u>NO</u>	I/we confirm that the student/s is/are medically and physically capable of undertaking regular Taekwondo sessions.
		I/we understand that fees must be paid at the beginning of each term. Students who have not paid by the end of week 2, will not be allowed to train.
<u>YES</u>	<u>NO</u>	The student/s agree to not engage in the teaching of Taekwondo in any form or any purpose without the written authority of Lead Instructor of Kununurra Taekwondo Inc.
<u>YES</u>	<u>NO</u>	I/we agree only to use Taekwondo as a legitimate form of self-defense for ourselves or our family or friends when there is no other way of defending ourselves or our family or friends.
<u>YES</u>	<u>NO</u>	I/we are aware that the committee of Kununurra Taekwondo Inc retain the right to reject any application to train or to suspend, remove and/or expel any students not following the directions and instructions of Instructors.
<u>YES</u>	<u>NO</u>	I/we agree to abide by decisions made by instructors and officials Taekwondo training, sparring, tournaments and Gradings, and follow all rules and regulations of Taekwondo as set out by Kununurra Taekwondo Inc.
<u>YES</u>	<u>NO</u>	I/we agree follow all rules and regulations of Taekwondo as set out by Kununurra Taekwondo Inc.
<u>YES</u>	<u>NO</u>	I understand that the student/s can only participate in Grading through recommendation by the Instructors of Kununurra Taekwondo, or the Master Instructors of Chungdokwan if Grading for a black belt dan level. This recommendation will only be made when the following requirements have been met: the expected level of Taekwondo skill, consistently appropriate behaviour (observing the student oath and the tenets of Taekwondo), participation in the required number of training/sparring sessions for current belt rank.
<u>YES</u>	<u>NO</u>	I understand that the student/s will only be awarded a promotion in belt/level if the required standards at a properly conducted Grading held by the Dan level required as set out by the World Taekwondo Federation and the Kukkiwon.
<u>YES</u> Or <u>N.A.</u>	<u>NO</u>	<p>I/ we agree that if transferring from another School/ club, proof of the existing rank/ belt level has to be verified by an instructor (sighting and verification of the most recent Gup certificate or Kukkiwon Dan certificate).</p> <p>Instructor use only for members transferring from another club: Gup/ Dan certificate sighted and verified Kukkiwon Dan Number:..... Issue date:.....</p>

I, _____ (Print Name of Student or Guardian if under 18)

Being the **Student** or **Parent/Guardian** certify that I have read and fully understood the above **Conditions of Membership**. Further, I will indemnify the Club, its Instructors, Members and/or Guests against any action which includes suit, either at law or inequity in respect to any loss, injury or damage that I might, or that might be cause to, or suffered by my offspring or ward, as a result of attending any of the Club's activities, including Training, Demonstrations, Functions or Competitions.

Signed: _____ Date _____