



# RYUKYU KOBUJUTSU ASSOCIATION (G.B.)

Affiliated to the Ryukyu Kobujutsu Hozon Shinkokai of Japan

琉球古武術保存振興会

RYUKYU KOBUJUTSU HOZON SHINKOKAI

英国支部

GREAT BRITAIN BRANCH

## APPLICATION FOR MEMBERSHIP

Please write in **BLOCK LETTERS**

Title		Relevant Previous Experience	
Forename(s)			
Surname			
Address		Style	
		Grades Attended	
Postcode		Current Membership of Martial Arts Clubs or Associations	
Telephone (Day)			
Telephone (Evening)			
Email Address		Reference from Club Please provide Name & Address	
Occupation			
Date of Birth			
Nationality			

**1. Do you suffer from, or have you ever had treatment for (circle as appropriate):**

**A: Epilepsy:** yes no

**C. Any heart complaint:** yes no

**B: Any form of mental illness:**  
yes no

**D. Any condition which might be adversely affected by sudden or energetic exercise?** Yes no

**2. Have you ever had life assurance or health insurance refused or made subject to special terms?** Yes no

**3. Have you ever been convicted of any criminal offence?** Yes no

If you have answered yes to any of the questions above, please provide details on the reverse of this form.

Please be assured that all information will be treated as confidential.

### **DECLARATION:**

I hereby apply to join the **RYUKYU KOBUJUTSU ASSOCIATION (G.B.)**. If my application is accepted I agree to be bound by the Rules of the Association. I declare that the information given above is true.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please send this form enclosing:

Licence Fee £25 (this includes insurance in England), 2 passport size photographs, and a SAE to:

**The Secretary, Ryukyu Kobujutsu Association (G.B.), 41 Crescent Road, Caterham, Surrey CR3 6LH**

Cheques should be made payable to Ryukyu Kobujutsu Association (G.B.).

Contact T: 01883 345968 E: jmead@rkagb.com