

The Aikido Fellowship of Great Britain

Membership Application Form
Please read overleaf before completing this form
Please print in CAPITALS

Personal Details	
Surname	ame Initials
Address	Date of Birth
	Telephone Number
	Emergency
Post Code	Contact Name Emergency
Email Address	Contact Number
Club Details Club Instructor	
Name	Name
Membership Type and Payment Details	
Insurance via the AFGB	Insurance via another Association
Membership Type Please Tick one only New ✓ Renewal ✓	New ✓ Renewal ✓
AFGB Membership Number (Renewal only)	Association Name
Membership Book Required (Irrespective of insurer, please tick if required)	AAUK Expiry Date
Annual Fees Junior Adult	Annual Fees Junior Adult
Please Tick One (under 17) £15 (17 & over) £25	(IExcluding Insurance) Please Tick One (under 17) £15 (17 & over) £25
Total Paid £	
Data Protection Act It is a requirement of the Data Protection Act 2018 that persons give their written authorisation to have their details recorded. By signing the box below, you are allowing the personal details on this form to be recorded on the Aikido Fellowship Database. This database is NOT distributed to any other third party and are not used for non-Aikido related functions. Failure to sign below will mean the applicant cannot be a member of the Aikido Fellowship. For persons under the age of 18 a parent or legal guardian must sign here. This indicates the assent of that parent / legal guardian to allow the person under the age of 18 to practice the martial art of Aikido.	
Print Name Signed	Date
Student Receipt	Aikido Fellowship Membership Application
Student Name	Amount Paid £
Money Received Signed By:	Payment Method (Carcle one) Cash Bank Transfer
Date	This receipt is to be retained by the student as proof of payment



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Notes on the completion of

The Aikido Fellowship of Great Britain Membership Form

General

- 1. Please write clearly (print in CAPITALS).
- 2. All boxes with a thick border must be completed by the Student/Parent/Guardian.
- 3. All data supplied on this form will be used solely by the Aikido Fellowship for Aikido purposes only.

Personal Details

- 4. If no email address is given then the club and/or Association will not be able to keep the Student/Parent/Guardian informed of any changes to class times, cancellations, courses etc.
- 5. Please supply your most used e-mail address.
- 6. "Emergency Contact Name" and "Emergency Contact Number" fields are required for health and safety purposes. This information will only be used in emergencies. In cases here the student is under 18, this should be a Parent or Legal Guardian.
- 7. When the form is being completed by a parent or guardian, it is preferable that email information and telephone information be theirs and not that of the minor.

Membership Type and Payment Details

- 8. Payments by cash or bank transfer.
- 9. If payment is by bank transfer, the receipt can only be completed when confirmation of payment has been made.

Data Protection Act 2018

- 10. You are entitled to see your records by requesting them in writing of the Association Data Protection Officer (ADPO) and by enclosing a stamped address envelope addressed to yourself at your registered address and a cheque for £50 made payable to the "The Aikido Fellowship of Great Britain". The address of the ADPO is available via your instructor. The ADPO will respond to your request within 30 working days.
- 11. The form must be signed and dated, otherwise it has no validity.
- 12. By signing the form, Students (Parents/Guardians on behalf of under 18's) are obliged to embrace the regulations and responsibilities laid down by the Aikido Fellowship of Great Britain.